

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

MCCLINTOCK 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 C00446815

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

CA

04

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								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
MCCLINTOCK 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))....	151627.13	574814.26
(b) Total Contribution Refunds (from Line 20(d))	0.00	3800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	151627.13	571014.26
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	148216.61	491781.85
(b) Total Offsets to Operating Expenditures (from Line 14).....	77.40	1475.62
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	148139.21	490306.23
8. Cash on Hand at Close of Reporting Period (from Line 27).....	367188.82	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

MCCLINTOCK 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).....	78899.00	272829.00
(ii) Unitemized.....	72378.13	278806.71
(iii) TOTAL of contributions from individuals ▶	151277.13	551635.71
(b) Political Party Committees.....	350.00	350.00
(c) Other Political Committees (such as PACs).....	0.00	22828.55
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	151627.13	574814.26
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.)	77.40	1475.62
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)..... ▶	151704.53	576289.88

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	148216.61	491781.85
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	3800.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	3800.00
21. OTHER DISBURSEMENTS	2200.00	135701.52
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	150416.61	631283.37

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	365900.90
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	151704.53
25. SUBTOTAL (add Line 23 and Line 24).....	517605.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	150416.61
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	367188.82

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ROBERT CRIDER

Mailing Address 8454 EL MODENA AVE

City State Zip Code
ELVERTA CA 95626

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
235.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 04 / 2013

Transaction ID : INCA100361

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
MR. HENRY LEONARDI

Mailing Address 432 CALLE DE LA MESA

City State Zip Code
NOVATO CA 94949

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

Name of Employer Occupation
LEONARDI PROPERTIES PROPERTY MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 09 / 2013

Transaction ID : INCA100456

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. ADAM PIERGALLINI

Mailing Address 532 W 1ST ST #12

City State Zip Code
CLAREMONT CA 91711

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

Name of Employer Occupation
SELF EMPLOYED BIO CHEMIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 13 / 2013

Transaction ID : INCA100538

Amount of Each Receipt this Period
2600.00

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

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

2685.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LISA PIERGALLINI

Mailing Address 532 W. 1ST ST. #12

City CLAREMONT State CA Zip Code 91711

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

Name of Employer N/A Occupation NOT EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 13 / 2013

Transaction ID : INCA100639

Amount of Each Receipt this Period
 2400.00

B. Full Name (Last, First, Middle Initial)
MR. DEAN KENNEDY

Mailing Address 1004 S SIERRA VISTA AVE

City ALHAMBRA State CA Zip Code 91801

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

Name of Employer SELF EMPLOYED Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 17 / 2013

Transaction ID : INCA100548

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
MR. DAVID OLIVER

Mailing Address 5930 DEARY WAY

City ORANGEVALE State CA Zip Code 95662

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

Name of Employer NONE Occupation RETIRED FIREFIGHTER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 17 / 2013

Transaction ID : INCA100549

Amount of Each Receipt this Period
 250.00

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

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

2750.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MS EILEEN AMOS

Mailing Address 35101 ALDERPOINT RD

City State Zip Code
BLOCKSBURG CA 95514

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
315.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : INCA100561

Amount of Each Receipt this Period
25.00

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

Mailing Address 10914 LA SERNA DR

City State Zip Code
WHITTIER CA 90604

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : INCA100560

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MS MAUREEN O'NEILL

Mailing Address 1810 ALDEN ST

City State Zip Code
BELMONT CA 94002

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2013

Transaction ID : INCA100582

Amount of Each Receipt this Period
100.00

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 8 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. BRUCE BOSTICK		Date of Receipt M M / D D / Y Y Y Y Y 10 / 23 / 2013	
Mailing Address 850 WIXFORD WAY		Transaction ID : INCA100611	
City SACRAMENTO	State CA	Zip Code 95864	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) B. MR. JOE HARN		Date of Receipt M M / D D / Y Y Y Y Y 10 / 23 / 2013	
Mailing Address 3340 ROLLS DR		Transaction ID : INCA100622	
City SHINGLE SPRINGS	State CA	Zip Code 95682	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer EL DORADO COUNTY	Occupation AUDITOR-CONTROLLER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		

Full Name (Last, First, Middle Initial) C. MR. WILLIAM LOCKE		Date of Receipt M M / D D / Y Y Y Y Y 10 / 23 / 2013	
Mailing Address 15012 LOS LOTES AVE		Transaction ID : INCA100605	
City WHITTIER	State CA	Zip Code 90605	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 220.00		

SUBTOTAL of Receipts This Page (optional).....	1240.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JAMES MCNEAL

Mailing Address 414 W ELM AVE

City State Zip Code
BURBANK CA 91506

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

Name of Employer Occupation
SCHAEFER AMBULANCE SERVICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2013

Transaction ID : INCA100600

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MS MARGARET MUNSON

Mailing Address 918 MONET CIR

City State Zip Code
WALNUT CREEK CA 94597

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2013

Transaction ID : INCA100603

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MRS. SHIRLEY REED

Mailing Address 5431 EL DORADO DR

City State Zip Code
HUNTINGTON BEACH CA 92649

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2013

Transaction ID : INCA100612

Amount of Each Receipt this Period
100.00

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

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

400.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SLOANE ULLIMAN

Mailing Address 6001 LAGUNA VILLA WAY

City State Zip Code
ELK GROVE CA 95758

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

Name of Employer Occupation
COMPUTER ASSOCIATES INC. PROPOSAL MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2013

Transaction ID : INCA100594

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MRS. NADINE LEYTON

Mailing Address 1150 POLARIS DR

City State Zip Code
NEWPORT BEACH CA 92660

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2013

Transaction ID : INCA100632

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1109 EMERALD BAY

City State Zip Code
LAGUNA BEACH CA 92651

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2013

Transaction ID : INCA100624

Amount of Each Receipt this Period
250.00

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

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

1275.00

**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 11 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. HOBART BIRMINGHAM

Mailing Address 70 27TH AVE

City SAN FRANCISCO State CA Zip Code 94121

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

Name of Employer BIRMINGHAM PERREAUULT GROUP Occupation INVESTMENT BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2013

Transaction ID : INCA100640

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL HAGEN

Mailing Address PO BOX 1565

City CRESTLINE State CA Zip Code 92325

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : INCA100642

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
DR. COREY MAAS

Mailing Address 12752 CALEB DR

City TRUCKEE State CA Zip Code 96161

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

Name of Employer TMC Occupation SURGEON

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : INCA100644

Amount of Each Receipt this Period
250.00

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

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

325.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. RICHARD DUFFY

Mailing Address 1858 SUNNINGDALE DR

City State Zip Code
ROSEVILLE CA 95747

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

Name of Employer Occupation
STATE OF CALIF. INVESTMENT ANALYST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 02 / 2013

Transaction ID : INCA100652

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS. CHARLOTTE MAECK

Mailing Address 2585 PACIFIC AVE

City State Zip Code
SAN FRANCISCO CA 94115

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

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
230.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 04 / 2013

Transaction ID : INCA100664

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM SPANGLER

Mailing Address 3196 N ALLEGHENY CT

City State Zip Code
WESTLAKE VILLAGE CA 91362

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 04 / 2013

Transaction ID : INCA100665

Amount of Each Receipt this Period
300.00

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: (check only one)	PAGE 13 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. DEAN KOONTZ

Mailing Address **PO BOX 9529**

City **NEWPORT BEACH** State **CA** Zip Code **92658**

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

Name of Employer **SELF EMPLOYED** Occupation **AUTHOR/WRITER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 08 / 2013

Transaction ID : INCA100711

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA ZINK

Mailing Address **PO BOX 1676**

City **VISTA** State **CA** Zip Code **92085**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 08 / 2013

Transaction ID : INCA100713

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
MR. BERNARD TRAWEEK

Mailing Address **6022 TIMBERLODGE LN**

City **ROSEVILLE** State **CA** Zip Code **95747**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 13 / 2013

Transaction ID : INCA100727

Amount of Each Receipt this Period
100.00

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

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

2775.00

**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 14 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MS EILEEN AMOS

Mailing Address 35101 ALDERPOINT RD

City: BLOCKSBURG State: CA Zip Code: 95514

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 315.00

Date of Receipt: 11 / 14 / 2013

Transaction ID : INCA100753

Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM BISSON

Mailing Address 1111 ROSE AVE

City: PASADENA State: CA Zip Code: 91107

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 11 / 14 / 2013

Transaction ID : INCA100728

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
MR. BEN CAGLE

Mailing Address 10992 CANYON HILL LN

City: SAN DIEGO State: CA Zip Code: 92126

FEC ID number of contributing federal political committee: C

Name of Employer: REQUESTED Occupation: REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 11 / 14 / 2013

Transaction ID : INCA100759

Amount of Each Receipt this Period: 50.00

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

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

175.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. E. LLOYD GRAHAM

Mailing Address 4443 MOORPARK WAY APT 303

City TOLUCA LAKE	State CA	Zip Code 91602
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
451.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		14		2013

Transaction ID : INCA100758

Amount of Each Receipt this Period
117.00

B. Full Name (Last, First, Middle Initial)
MRS. SHARON HANES

Mailing Address 4286 COACHMAN CIR

City WESTLAKE VILLAGE	State CA	Zip Code 91362
--------------------------	-------------	-------------------

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

Name of Employer NONE	Occupation HOUSEWIFE
--------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		14		2013

Transaction ID : INCA100760

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
MRS. HAZEL HART

Mailing Address 842 MUIRLANDS VISTA WAY

City LA JOLLA	State CA	Zip Code 92037
------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		14		2013

Transaction ID : INCA100731

Amount of Each Receipt this Period
50.00

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

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

467.00

**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 16 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. BRUCE HIGLEY

Mailing Address 880 CAMPUS COMMONS RD

City State Zip Code
SACRAMENTO CA 95825

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 14 / 2013

Transaction ID : INCA100764

Amount of Each Receipt this Period
100.00

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

Mailing Address 645 S COLLEGE DR

City State Zip Code
SANTA MARIA CA 93454

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

Name of Employer Occupation
SELF - YAICHIRO MINAMI COMMERCIAL PROPERTY OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 14 / 2013

Transaction ID : INCA100745

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN ROSS

Mailing Address 340 W CLARK ST

City State Zip Code
UPLAND CA 91784

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

Name of Employer Occupation
ROLYN OPTICS COMPANY BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 14 / 2013

Transaction ID : INCA100756

Amount of Each Receipt this Period
100.00

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 17 OF 173
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. RAYMOND ROWE

Mailing Address 49 E E ST

City ENCINITAS State CA Zip Code 92024

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 14 / 2013

Transaction ID : INCA100729

Amount of Each Receipt this Period
 _____ 100.00

B. Full Name (Last, First, Middle Initial)
MR. HOWARD CHRISTIE

Mailing Address 26 CORRAL RD

City BELL CANYON State CA Zip Code 91307

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA100765

Amount of Each Receipt this Period
 _____ 40.00

C. Full Name (Last, First, Middle Initial)
MR. DONALD CLINTON

Mailing Address 2052 AMES ST

City LOS ANGELES State CA Zip Code 90027

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

Name of Employer CLINTONS RESTURANTS Occupation RESTURANT OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA100804

Amount of Each Receipt this Period
 _____ 225.00

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

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

_____ 365.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. HAROLD COFFEE

Mailing Address 25 AMBER DR

City State Zip Code
SAN FRANCISCO CA 94131

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 15 / 2013

Transaction ID : INCA101043

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. ROBERT CRIDER

Mailing Address 8454 EL MODENA AVE

City State Zip Code
ELVERTA CA 95626

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
235.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 15 / 2013

Transaction ID : INCA100796

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MRS. JUANITA EYHERABIDE

Mailing Address 5284 KENT DR

City State Zip Code
BAKERSFIELD CA 93306

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

Name of Employer Occupation
SELF - JUANITA EYHERABIDE RANCHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 15 / 2013

Transaction ID : INCA100799

Amount of Each Receipt this Period
100.00

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

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

250.00

**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 173	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. CHARLES GOMES

Mailing Address 2053 RIESLING WAY

City CAMERON PARK State CA Zip Code 95682

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

Name of Employer VERISIGN, INC. Occupation VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA101063

Amount of Each Receipt this Period
500.00

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

Mailing Address 3327 CHATWIN AVE

City LONG BEACH State CA Zip Code 90808

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA101141

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. J. KERN HAMILTON

Mailing Address 800 BLOSSOM HILL RD UNIT E324

City LOS GATOS State CA Zip Code 95032

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA101065

Amount of Each Receipt this Period
300.00

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

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

1300.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. BERT HASSLER

Mailing Address 128 ELKINS AVE

City State Zip Code
ARCADIA CA 91006

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 15 / 2013

Transaction ID : INCA101075

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES HAWKINS

Mailing Address 3551 GRAND AVE

City State Zip Code
SAN MARCOS CA 92078

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

Name of Employer Occupation
EDISON INTERNATIONAL NUCLEAR COMPUTER TECH

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
340.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 15 / 2013

Transaction ID : INCA100778

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
JAYNE & DENNIS HORN

Mailing Address 5211 MOUNT ARIANE TER

City State Zip Code
SAN DIEGO CA 92111

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 15 / 2013

Transaction ID : INCA100853

Amount of Each Receipt this Period
50.00

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

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

160.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KEYSTON FAMILY TRUST

Mailing Address **PO BOX 7066**

City **CARMEL** State **CA** Zip Code **93921**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 15 / 2013

Transaction ID : INCA101012

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MRS. DOROTHY KRACK

Mailing Address **1128 TOBIAS DR**

City **CHULA VISTA** State **CA** Zip Code **91911**

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

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 15 / 2013

Transaction ID : INCA100771

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. HERBERT LEVIN

Mailing Address **724 E GRINELL DR**

City **BURBANK** State **CA** Zip Code **91501**

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

Name of Employer Occupation
CA STATE DEPT OF JUSTICE LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 15 / 2013

Transaction ID : INCA100856

Amount of Each Receipt this Period
100.00

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

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

400.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. JAMES OLIVER		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2013	
Mailing Address 375 BULLARD AVE STE 1		Transaction ID : INCA100805	
City CLOVIS	State CA	Zip Code 93612	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer STATE FARM INSURANCE	Occupation INSURANCE AGENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. MR. CHARLIE OLSON		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2013	
Mailing Address 588 CRAWFORD DR		Transaction ID : INCA101118	
City SUNNYVALE	State CA	Zip Code 94087	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer C J OLSON CHERRIES	Occupation FARMER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00		

Full Name (Last, First, Middle Initial) C. MR. HAROLD PEASE		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2013	
Mailing Address 20600 OAKSBORO CIR		Transaction ID : INCA100786	
City WOODLAND HILLS	State CA	Zip Code 91364	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 370.00		

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	250.00

**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 23 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. HAROLD PEASE

Mailing Address 20600 OAKSBORO CIR

City: WOODLAND HILLS State: CA Zip Code: 91364

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 370.00

Date of Receipt: 11 / 15 / 2013

Transaction ID : INCA101042

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
MS FRANCES POHORSKY

Mailing Address 12861 CHATSWORTH LN

City: GRASS VALLEY State: CA Zip Code: 95945

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 700.00

Date of Receipt: 11 / 15 / 2013

Transaction ID : INCA100775

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
MR. DON PUTNAM

Mailing Address 764 CAMINO MANZANAS

City: THOUSAND OAKS State: CA Zip Code: 91360

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 11 / 15 / 2013

Transaction ID : INCA101111

Amount of Each Receipt this Period: 100.00

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

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

300.00

**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 24 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. MORTON RAPPAPORT

Mailing Address 3068 DONA SUSANA DR

City State Zip Code
STUDIO CITY CA 91604

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 15 / 2013

Transaction ID : INCA100847

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MRS. KAREN REED

Mailing Address 1311 CRESCENT OAKS WAY

City State Zip Code
PASO ROBLES CA 93446

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

Name of Employer Occupation
STATE OF CA OFFICE TECHNICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 15 / 2013

Transaction ID : INCA101155

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. W. RUGG

Mailing Address 1753 STARVIEW DR

City State Zip Code
SAN LEANDRO CA 94577

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 15 / 2013

Transaction ID : INCA101091

Amount of Each Receipt this Period
100.00

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

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

225.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ANTHONY RYAN

Mailing Address 393 DORCHESTER RD

City LYME State NH Zip Code 03768

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA101145

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. RALPH SCRIBA

Mailing Address 2055 VIA VISALIA

City PALOS VERDES ESTAT State CA Zip Code 90274

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA101026

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. ABE SIEMENS

Mailing Address 47 PRINCETON DR

City RANCHO MIRAGE State CA Zip Code 92270

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA100781

Amount of Each Receipt this Period
500.00

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 26 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JERALD SMITH

Mailing Address 3418 HEPBURN CIR

City STOCKTON State CA Zip Code 95209

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
513.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA101047

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. LOIS TITUS

Mailing Address 33 N LINDEN DR

City VENTURA State CA Zip Code 93004

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA101052

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MS CARLA TRENT

Mailing Address 324 CHESTNUT HILL CT APT 16

City THOUSAND OAKS State CA Zip Code 91360

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA100821

Amount of Each Receipt this Period
250.00

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

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

550.00

**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 27 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JUDITH TSCHETTER

Mailing Address 2425 POINSETTIA ST

City SANTA ANA State CA Zip Code 92706

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

Name of Employer NONE Occupation NONE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA101018

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
MRS. PATRICIA WALKER

Mailing Address 812 BIRCHWOOD DR

City LOS ANGELES State CA Zip Code 90024

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA101108

Amount of Each Receipt this Period
 75.00

C. Full Name (Last, First, Middle Initial)
MRS. BONNIE WILLIAMS

Mailing Address 9260 WINDING OAK DR

City FAIR OAKS State CA Zip Code 95628

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

Name of Employer FOLSOM AUTOTECH Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA101104

Amount of Each Receipt this Period
 100.00

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

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

675.00

**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 28 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. ROBIN WILLIS

Mailing Address 196 QUAILS TRL

City THOUSAND OAKS State CA Zip Code 91361

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA101023

Amount of Each Receipt this Period
 50.00

Amount of Each Receipt this Period
 400.00

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA ZINK

Mailing Address PO BOX 1676

City VISTA State CA Zip Code 92085

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : INCA101067

Amount of Each Receipt this Period
 50.00

Amount of Each Receipt this Period
 225.00

C. Full Name (Last, First, Middle Initial)
MR. NEWTON DRURY JR.

Mailing Address 3 CORTE BOMBERO

City ORINDA State CA Zip Code 94563

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 18 / 2013

Transaction ID : INCA100912

Amount of Each Receipt this Period
 100.00

Amount of Each Receipt this Period
 400.00

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

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

200.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MS SOPHIE FARELL

Mailing Address 9110 HAPPY CAMP RD

City: MOORPARK State: CA Zip Code: 93021

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 400.00

Date of Receipt: 11 / 18 / 2013

Transaction ID : INCA101011

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
MR. GREGORY GIBSON

Mailing Address 17174 ALEXANDRA WAY

City: GRASS VALLEY State: CA Zip Code: 95949

FEC ID number of contributing federal political committee: C

Name of Employer: SELF EMPLOYED Occupation: GENERAL CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 11 / 18 / 2013

Transaction ID : INCA101001

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
MR. DUANE HANSON

Mailing Address 120 SARAH DR

City: MILL VALLEY State: CA Zip Code: 94941

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 11 / 18 / 2013

Transaction ID : INCA100935

Amount of Each Receipt this Period: 100.00

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

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

300.00

**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 30 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. BILL JUNEAU

Mailing Address 601 VIA PARO

City PALOS VERDES ESTAT State CA Zip Code 90274

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2013

Transaction ID : INCA100995

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID KEYSTON

Mailing Address PO BOX 7066

City CARMEL State CA Zip Code 93921

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2013

Transaction ID : INCA100896

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM MATTOX

Mailing Address 1058 N LA CADENA DR

City COLTON State CA Zip Code 92324

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **575.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2013

Transaction ID : INCA100874

Amount of Each Receipt this Period
125.00

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

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

575.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. VERNON MCLASKEY

Mailing Address 7535 AUBURN FOLSOM RD

City State Zip Code
GRANITE BAY CA 95746

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 18 / 2013

Transaction ID : INCA100942

Amount of Each Receipt this Period
125.00

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

Mailing Address 3305 ELKHORN BLVD STE 1

City State Zip Code
NORTH HIGHLANDS CA 95660

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

Name of Employer Occupation
MEINCO PROPERTIES PROPERTY MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 18 / 2013

Transaction ID : INCA100863

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH MILLER

Mailing Address 1959 AVENIDA FELICIANO

City State Zip Code
RANCHO PALOS VERDE CA 90275

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 18 / 2013

Transaction ID : INCA100861

Amount of Each Receipt this Period
50.00

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

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

375.00

**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 32 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. KENDALL MILLER

Mailing Address 7350 WAKEFIELD AVE

City REEDLEY State CA Zip Code 93654

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

Name of Employer KENCAROL, INC. Occupation FARM MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 18 / 2013

Transaction ID : INCA100898

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES REBOLLINI

Mailing Address 629 BARCELONA DR

City SONOMA State CA Zip Code 95476

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 18 / 2013

Transaction ID : INCA100915

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. NORMAN SNEDDON

Mailing Address 8889 HIGHWAY 49

City SONORA State CA Zip Code 95370

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 18 / 2013

Transaction ID : INCA100927

Amount of Each Receipt this Period
75.00

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 33 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. TY SONNTAG

Mailing Address 215 OAK WOOD WAY

City State Zip Code
LOS GATOS CA 95032

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

Name of Employer Occupation
LE T INC. CONSTRUCTION SUPERVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 18 / 2013

Transaction ID : INCA100964

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. RUSSELL SUTHERLAND

Mailing Address 5109 MUELLER RD

City State Zip Code
MARIPOSA CA 95338

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 18 / 2013

Transaction ID : INCA100972

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT TREFZGER

Mailing Address 10200 MT VERNON RD

City State Zip Code
AUBURN CA 95603

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
220.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 18 / 2013

Transaction ID : INCA101000

Amount of Each Receipt this Period
30.00

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

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

430.00

**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 34 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. FRANK VANSKIKE

Mailing Address 380 AILANTHUS LN

City State Zip Code
PLACERVILLE CA 95667

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 18 / 2013

Transaction ID : INCA100867

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. EARL WHETSTONE

Mailing Address 9624 CROSBY DR

City State Zip Code
PLEASANTON CA 94588

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

Name of Employer Occupation
REFUSED REFUSED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 18 / 2013

Transaction ID : INCA101005

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
MR. PAUL ZGRAGGEN

Mailing Address 3730 KINGBARNES

City State Zip Code
ROSEVILLE CA 95747

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 18 / 2013

Transaction ID : INCA100866

Amount of Each Receipt this Period
100.00

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

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

275.00

**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 35 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. ANN BEHRENDT

Mailing Address 6915 GULL CT

City State Zip Code
VENTURA CA 93003

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 19 / 2013

Transaction ID : INCA101276

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MR. PHILLIP DORE

Mailing Address 2414 HUNTINGTON LN

City State Zip Code
REDONDO BEACH CA 90278

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

Name of Employer Occupation
SOUTHLAND INDUSTRIES HVAC ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 19 / 2013

Transaction ID : INCA101280

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. BRUCE FREDRICKSON

Mailing Address 399 LIVE OAK CT

City State Zip Code
MILPITAS CA 95035

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

Name of Employer Occupation
PHYSICAL ELECTRONICS USA ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 19 / 2013

Transaction ID : INCA101177

Amount of Each Receipt this Period
50.00

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

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

300.00

**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 36 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. EUNICE GOODAN

Mailing Address 2550 ABERDEEN AVE

City State Zip Code
LOS ANGELES CA 90027

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		19		2013

Transaction ID : INCA101302

Amount of Each Receipt this Period
200.00

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

Mailing Address 16003 GRIFFITH AVE

City State Zip Code
WASCO CA 93280

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		19		2013

Transaction ID : INCA101294

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MRS. SHARON KRAUSE

Mailing Address 1989 SHEFFIELD DR

City State Zip Code
EL DORADO HILLS CA 95762

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

Name of Employer Occupation
SACRAMENTO EMPLOYMENT TRAINING AG| COUNSELOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		19		2013

Transaction ID : INCA101300

Amount of Each Receipt this Period
200.00

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

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

450.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. LEW PRICE		Date of Receipt M M / D D / Y Y Y Y 11 / 19 / 2013	
Mailing Address PO BOX 88		Transaction ID : INCA101299	
City GARDEN VALLEY	State CA	Zip Code 95633	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer SELF, LEW P. PRICE	Occupation WRITER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00		

Full Name (Last, First, Middle Initial) B. R. VARNEY		Date of Receipt M M / D D / Y Y Y Y 11 / 19 / 2013	
Mailing Address 551 HALE ST		Transaction ID : INCA101178	
City PALO ALTO	State CA	Zip Code 94301	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer RVV ASSOCIATES	Occupation SELF EMPLOYED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. MR. JOHN WARKENTIN		Date of Receipt M M / D D / Y Y Y Y 11 / 19 / 2013	
Mailing Address 6521 CORDOBA #2		Transaction ID : INCA101180	
City GOLETA	State CA	Zip Code 93117	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer SELF - KAMAP PROPERTY MGMT	Occupation PROPERTY MANAGEMENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1050.00		

SUBTOTAL of Receipts This Page (optional).....	400.00
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 38 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. GARY WEBER

Mailing Address 6519 QUINTON LN

City State Zip Code
TUJUNGA CA 91042

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 19 / 2013

Transaction ID : INCA101282

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MS EILEEN AMOS

Mailing Address 35101 ALDERPOINT RD

City State Zip Code
BLOCKSBURG CA 95514

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
315.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 20 / 2013

Transaction ID : INCA101234

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
MR. HAROLD COFFEE

Mailing Address 25 AMBER DR

City State Zip Code
SAN FRANCISCO CA 94131

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 20 / 2013

Transaction ID : INCA101213

Amount of Each Receipt this Period
400.00

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

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

520.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM COLLINS

Mailing Address 1150 FLYING FISH ST

City State Zip Code
FOSTER CITY CA 94404

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2013

Transaction ID : INCA101205

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. OLEVA DORMAN

Mailing Address 4571 PARK PAXTON PL

City State Zip Code
SAN JOSE CA 95136

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2013

Transaction ID : INCA101313

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MRS. OLEVA DORMAN

Mailing Address 4571 PARK PAXTON PL

City State Zip Code
SAN JOSE CA 95136

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2013

Transaction ID : INCA101340

Amount of Each Receipt this Period
50.00

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

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

200.00

**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 40 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) MRS. LYNN HAEN		Date of Receipt M M / D D / Y Y Y Y Y 11 / 20 / 2013
Mailing Address PO BOX 8998		Transaction ID : INCA101271
City SOUTH LAKE TAHOE	State CA Zip Code 96158	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) MR. JAMES KIRK		Date of Receipt M M / D D / Y Y Y Y Y 11 / 20 / 2013
Mailing Address 6132 RAINBOW HEIGHTS RD		Transaction ID : INCA101245
City FALLBROOK	State CA Zip Code 92028	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) MR. ARTHUR MICHELETTI		Date of Receipt M M / D D / Y Y Y Y Y 11 / 20 / 2013
Mailing Address 25380 BECKY LN		Transaction ID : INCA101325
City LOS ALTOS HILLS	State CA Zip Code 94022	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional).....	775.00
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 41 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. RICHARD NIELSEN

Mailing Address 1731 E ROSEVILLE PKWY STE 250

City	State	Zip Code
ROSEVILLE	CA	95661

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

Name of Employer	Occupation
SELF EMPLOYED	ARCHITECT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 20 / 2013

Transaction ID : INCA101237

Amount of Each Receipt this Period

300.00

B. Full Name (Last, First, Middle Initial)
MR. DONN OLSON

Mailing Address 2730 KALMAN ST

City	State	Zip Code
ACTON	CA	93510

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

Name of Employer	Occupation
ANTHONY INT.	TOOL MAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 20 / 2013

Transaction ID : INCA101221

Amount of Each Receipt this Period

40.00

C. Full Name (Last, First, Middle Initial)
MR. MORTON RAPPAPORT

Mailing Address 3068 DONA SUSANA DR

City	State	Zip Code
STUDIO CITY	CA	91604

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 20 / 2013

Transaction ID : INCA101335

Amount of Each Receipt this Period

25.00

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

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

365.00

**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 42 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MRS. COLLEEN RICKEY		Date of Receipt M M / D D / Y Y Y Y 11 / 20 / 2013	
Mailing Address 860 ALOHA ST		Transaction ID : INCA101216	
City CAMARILLO	State CA	Zip Code 93010	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 230.00		

Full Name (Last, First, Middle Initial) B. MR. JOHN RODGERS		Date of Receipt M M / D D / Y Y Y Y 11 / 20 / 2013	
Mailing Address 5440 WASHINGTON ST		Transaction ID : INCA101206	
City NAPA	State CA	Zip Code 94558	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00	
Name of Employer NONE	Occupation RETIRED MARINE ENGINEER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2100.00		

Full Name (Last, First, Middle Initial) C. MRS. DIANNE SCHACK		Date of Receipt M M / D D / Y Y Y Y 11 / 20 / 2013	
Mailing Address 19 REATA PL		Transaction ID : INCA101246	
City OAKLAND	State CA	Zip Code 94618	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer NONE	Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00		

SUBTOTAL of Receipts This Page (optional).....	550.00
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 43 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. WARREN WISECARVER		Date of Receipt M M / D D / Y Y Y Y 11 / 20 / 2013	
Mailing Address 40 ANDERSON CIR		Transaction ID : INCA101347	
City WALNUT CREEK	State CA	Zip Code 94595	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer BISHOP-WISECARVER CORPORATION	Occupation CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00		

Full Name (Last, First, Middle Initial) B. MR. RICHARD BREESE		Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2013	
Mailing Address 5262 TUFTON ST		Transaction ID : INCA101400	
City WESTMINSTER	State CA	Zip Code 92683	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 270.00		

Full Name (Last, First, Middle Initial) C. MR. J. CROWELL		Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2013	
Mailing Address 1371 TREASURE LN		Transaction ID : INCA101368	
City SANTA ANA	State CA	Zip Code 92705	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 325.00		

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	90.00

**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 44 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JERRY DEAN		Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2013	
Mailing Address 4697 HOLYOKE PL		Transaction ID : INCA101397	
City RIVERSIDE	State CA	Zip Code 92507	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer NAVY DEPARTMENT	Occupation COMPUTER SCIENTIST		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 282.00		

Full Name (Last, First, Middle Initial) B. MR. JAMES FISHER		Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2013	
Mailing Address 3040 JAVA RD		Transaction ID : INCA101413	
City COSTA MESA	State CA	Zip Code 92626	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		

Full Name (Last, First, Middle Initial) C. MRS. PATRICIA HERRON		Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2013	
Mailing Address 139 LANSBERRY CT		Transaction ID : INCA101377	
City LOS GATOS	State CA	Zip Code 95032	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer SELF, PATRICIA A. HERRON	Occupation BOOKKEEPER		
Receipt For: 2014 <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).....	225.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 45 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BARBARA & JAMES HETZLER

Mailing Address 25382 SEA BLUFFS DR UNIT 209

City DANA POINT	State CA	Zip Code 92629
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		21		2013

Transaction ID : INCA101419

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. BRUCE HIGLEY

Mailing Address 880 CAMPUS COMMONS RD

City SACRAMENTO	State CA	Zip Code 95825
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		21		2013

Transaction ID : INCA101448

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. BRUCE MORRISON

Mailing Address 2757 CAMBRIDGE RD

City CAMERON PARK	State CA	Zip Code 95682
----------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		21		2013

Transaction ID : INCA101382

Amount of Each Receipt this Period
50.00

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

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

250.00

**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 46 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. RONALD MOSTERO

Mailing Address 505 CHISWICK RD

City PALOS VERDES ESTAT State CA Zip Code 90274

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : INCA101380

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
MR. GREG MYERS

Mailing Address 5964 WHISPERLODGE WAY

City ROSEVILLE State CA Zip Code 95747

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : INCA101452

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MRS. JACQUELINE NEVITT

Mailing Address 6745 COLTON BLVD

City OAKLAND State CA Zip Code 94611

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : INCA101358

Amount of Each Receipt this Period
100.00

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 47 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MRS. LISA PARIS		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2013	
Mailing Address PO BOX 2280		Transaction ID : INCA101444	
City LOOMIS	State CA	Zip Code 95650	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer SCOTT PARIS ENT.	Occupation BOOKKEEPER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		

Full Name (Last, First, Middle Initial) B. KATHERINE PREISKER DURLEY		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2013	
Mailing Address 4884 N VAN NESS BLVD		Transaction ID : INCA101406	
City FRESNO	State CA	Zip Code 93704	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) C. CLAIRE RAINS		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2013	
Mailing Address 420 41ST AVE		Transaction ID : INCA101431	
City SAN FRANCISCO	State CA	Zip Code 94121	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

SUBTOTAL of Receipts This Page (optional).....	550.00
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 48 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) MR. DELBERT RAPINI		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2013
Mailing Address 28555 ROLLINS LAKE RD		Transaction ID : INCA101404
City COLFAX	State CA	
Zip Code 95713		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer SELF EMPLOYED	Occupation DEVELOPER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) MRS. CAROL WILSON		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2013
Mailing Address 2197 SUTTER VIEW LN		Transaction ID : INCA101439
City LINCOLN	State CA	
Zip Code 95648		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1075.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) MR. SCOTT BANISTER		Date of Receipt M M / D D / Y Y Y Y Y 11 / 22 / 2013
Mailing Address PO BOX 997		Transaction ID : INCA101476
City HALF MOON BAY	State CA	
Zip Code 94019		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 325.00
Name of Employer SELF EMPLOYED	Occupation STARTUP CONSULTANT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	225.00
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 49 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. PETER CANNON

Mailing Address 2957 SEAVIEW AVE

City State Zip Code
VENTURA CA 93001

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

Name of Employer Occupation
VRE CO. CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 22 / 2013

Transaction ID : INCA101457

Amount of Each Receipt this Period
250.00

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

Mailing Address 764 SUTRO AVE

City State Zip Code
NOVATO CA 94947

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

Name of Employer Occupation
SELF EMPLOYED INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 22 / 2013

Transaction ID : INCA101474

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. WARREN WISECARVER

Mailing Address 40 ANDERSON CIR

City State Zip Code
WALNUT CREEK CA 94595

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

Name of Employer Occupation
BISHOP-WISECARVER CORPORATION CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 22 / 2013

Transaction ID : INCA101464

Amount of Each Receipt this Period
100.00

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

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

450.00

**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 50 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SLOANE ULLIMAN		Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2013	
Mailing Address 6001 LAGUNA VILLA WAY		Transaction ID : INCA101481	
City ELK GROVE	State CA	Zip Code 95758	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer COMPUTER ASSOCIATES INC.	Occupation PROPOSAL MANAGER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) B. MRS. PAMELA BURKE		Date of Receipt M M / D D / Y Y Y Y 11 / 25 / 2013	
Mailing Address 445 OAK HILL TER		Transaction ID : INCA101501	
City LOMPOC	State CA	Zip Code 93436	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00		

Full Name (Last, First, Middle Initial) C. MRS. MARCIA BURNETT		Date of Receipt M M / D D / Y Y Y Y 11 / 25 / 2013	
Mailing Address 1238 SUSAN WAY		Transaction ID : INCA101510	
City SUNNYVALE	State CA	Zip Code 94087	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer BURNETT ACCOUNTING & TAX SERVICES	Occupation ACCOUNTANT		
Receipt For: 2014 <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).....	375.00
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 51 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) P. CHENG		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2013	
Mailing Address 2723 SILVER RAPIDS RD		Transaction ID : INCA101534	
City VALLEY SPRINGS	State CA	Zip Code 95252	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer CGSD CORP.	Occupation EXECUTIVE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		

Full Name (Last, First, Middle Initial) MR. JOE CRAIL		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2013	
Mailing Address 2172 DUPONT DR STE 230		Transaction ID : INCA101486	
City IRVINE	State CA	Zip Code 92612	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1600.00	
Name of Employer WESTERN MUTUAL INS.	Occupation EXEC		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) MRS. MARY KAEHLER		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2013	
Mailing Address 1025 E ARMSTRONG RD		Transaction ID : INCA101503	
City LODI	State CA	Zip Code 95242	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00		

SUBTOTAL of Receipts This Page (optional).....	2200.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 52 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MIYO KUNITAKE

Mailing Address 3541 GRIFFITH PARK BLVD

City LOS ANGELES State CA Zip Code 90027

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : INCA101489

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
E. JAMES ROGERS M.D.

Mailing Address 1028 LAKEHOME DR

City LODI State CA Zip Code 95242

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

Name of Employer NONE Occupation RETIRED PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : INCA101500

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. W. LEONARD SEELEY

Mailing Address 10351 KENWOOD DR

City GRASS VALLEY State CA Zip Code 95949

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : INCA101483

Amount of Each Receipt this Period
500.00

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

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

635.00

**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 53 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JEFFREY STEWART

Mailing Address 2351 SUNSET BLVD STE 170

City State Zip Code
ROCKLIN CA 95765

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

Name of Employer Occupation
INTEL CORP. COMPUTER ANALYST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 25 / 2013

Transaction ID : INCA101522

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES DOWNEY

Mailing Address 26000 NEWBRIDGE DR

City State Zip Code
LOS ALTOS HILLS CA 94022

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

Name of Employer Occupation
ALTOS SONOMA CORP. EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 26 / 2013

Transaction ID : INCA101562

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM DUFFY JR.

Mailing Address 20637 LEONARD RD

City State Zip Code
SARATOGA CA 95070

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 26 / 2013

Transaction ID : INCA101553

Amount of Each Receipt this Period
100.00

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

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

300.00

**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 54 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. CHARLIE OLSON		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2013	
Mailing Address 588 CRAWFORD DR		Transaction ID : INCA101556	
City SUNNYVALE	State CA	Zip Code 94087	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer C J OLSON CHERRIES	Occupation FARMER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00		

Full Name (Last, First, Middle Initial) B. NICHOLAS PEAY		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2013	
Mailing Address 2965 FAIRMOUNT BLVD		Transaction ID : INCA101568	
City CLEVELAND HEIGHTS	State OH	Zip Code 44118	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer NICHOLAS PEAY, JR.	Occupation INVESTOR		
Receipt For: 2014 <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) C. MRS. ESTHER GREENE		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 29 / 2013	
Mailing Address 4100 FOLSOM BLVD UNIT 7D		Transaction ID : INCA101590	
City SACRAMENTO	State CA	Zip Code 95819	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL HAGEN

Mailing Address **PO BOX 1565**

City **CRESTLINE** State **CA** Zip Code **92325**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 30 / 2013

Transaction ID : INCA101644

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
DR. COREY MAAS

Mailing Address **12752 CALEB DR**

City **TRUCKEE** State **CA** Zip Code **96161**

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

Name of Employer **TMC** Occupation **SURGEON**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 30 / 2013

Transaction ID : INCA101645

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JAMES & JOYCE FEUSI

Mailing Address **PO BOX 1245**

City **LOOMIS** State **CA** Zip Code **95650**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **305.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 02 / 2013

Transaction ID : INCA101659

Amount of Each Receipt this Period
105.00

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

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

380.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. NANCY KAYS

Mailing Address 2231 N INDIAN HILL BLVD

City State Zip Code
CLAREMONT CA 91711

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 02 / 2013

Transaction ID : INCA101657

Amount of Each Receipt this Period
75.00

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

Mailing Address 8 CHESHIRE CT

City State Zip Code
NEWPORT BEACH CA 92660

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 02 / 2013

Transaction ID : INCA101675

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
MRS. VICTORIA SERRA

Mailing Address 28101 ESPINOZA

City State Zip Code
MISSION VIEJO CA 92692

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

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 02 / 2013

Transaction ID : INCA101653

Amount of Each Receipt this Period
50.00

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

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

275.00

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

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

FOR LINE NUMBER: PAGE 57 OF 173
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. DAVID THOMAS

Mailing Address 10786 N EAGLE CREST LN

City FRESNO State CA Zip Code 93730

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

Name of Employer ROYAL T MANAGEMENT Occupation REAL ESTATE PROPERTY MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 02 / 2013

Transaction ID : INCA101671

Amount of Each Receipt this Period
 400.00

B. Full Name (Last, First, Middle Initial)
MRS. LORA BENEDICT

Mailing Address 144 LOMA ALTA DR

City OCEANSIDE State CA Zip Code 92054

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2013

Transaction ID : INCA101697

Amount of Each Receipt this Period
 55.00

C. Full Name (Last, First, Middle Initial)
MRS. SONJA BILLOTTE

Mailing Address 441 TRINITY AVE

City YUBA CITY State CA Zip Code 95991

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2013

Transaction ID : INCA101689

Amount of Each Receipt this Period
 40.00

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

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

495.00

**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 58 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MS BEVERLY DI VECCHIO

Mailing Address 2825 PARKVIEW DR

City ALHAMBRA State CA Zip Code 91803

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2013

Transaction ID : INCA101694

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
MR. CRAIG DUNCAN

Mailing Address 4453 LOS SERRANOS BLVD

City CHINO HILLS State CA Zip Code 91709

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2013

Transaction ID : INCA101718

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. DAVID JONES

Mailing Address PO BOX 3112

City THOUSAND OAKS State CA Zip Code 91360

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

Name of Employer J&M INSURANCE Occupation INS BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2013

Transaction ID : INCA101709

Amount of Each Receipt this Period
50.00

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

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

185.00

**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 59 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EVELYN RICHMOND

Mailing Address **24 ESSEX CT**

City **ALAMO** State **CA** Zip Code **94507**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
12 / 03 / 2013

Transaction ID : INCA101696

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. EDWARD SIVAS

Mailing Address **26648 INDIAN PEAK RD**

City **RANCHO PALOS VERDE** State **CA** Zip Code **90275**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
12 / 03 / 2013

Transaction ID : INCA101686

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MRS. CAROLYN CONWAY

Mailing Address **1639 HARBOR CREST CIR**

City **CORONA DEL MAR** State **CA** Zip Code **92625**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y
12 / 06 / 2013

Transaction ID : INCA101725

Amount of Each Receipt this Period
50.00

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

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

800.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. GLORIA GAUSMAN

Mailing Address 1804 ROCHHAMPTON PLACE

City State Zip Code
EL DORADO HILLS CA 95762

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

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2013

Transaction ID : INCA101769

Amount of Each Receipt this Period
50.00

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

Mailing Address 6940 EASTSIDE CT

City State Zip Code
ORANGEVALE CA 95662

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2013

Transaction ID : INCA101779

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. JERALD SMITH

Mailing Address 3418 HEPBURN CIR

City State Zip Code
STOCKTON CA 95209

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
513.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2013

Transaction ID : INCA101736

Amount of Each Receipt this Period
50.00

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

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

600.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) MR. RAY THOMPSON		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 1545 GRASS VALLEY HWY APT 49		Transaction ID : INCA101762
City AUBURN	State CA	
Zip Code 95603		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer DRIFTWOOD VILLAGE	Occupation PROPERTY MANAGER	
Receipt For: 2014 <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) MS. M. GLORIA ZARAVIA		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 1425 2ND AVE SPC 132		Transaction ID : INCA101737
City CHULA VISTA	State CA	
Zip Code 91911		Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 210.00	

Full Name (Last, First, Middle Initial) MS EILEEN AMOS		Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 35101 ALDERPOINT RD		Transaction ID : INCA101801
City BLOCKSBURG	State CA	
Zip Code 95514		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 315.00	

SUBTOTAL of Receipts This Page (optional).....	560.00
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 62 OF 173
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. CHARLEEN DUKE

Mailing Address 300 HILL ST

City State Zip Code
SAN FRANCISCO CA 94114

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
298.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2013

Transaction ID : INCA101789

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. GREGORY GENSICHEN

Mailing Address 25121 WHITESPRING

City State Zip Code
MISSION VIEJO CA 92692

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

Name of Employer Occupation
UNISYS MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2013

Transaction ID : INCA101814

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. J. KERN HAMILTON

Mailing Address 800 BLOSSOM HILL RD UNIT E324

City State Zip Code
LOS GATOS CA 95032

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2013

Transaction ID : INCA101800

Amount of Each Receipt this Period
300.00

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 63 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. DAVID LACEY

Mailing Address 1807 HUMMINGBIRD ST

City COSTA MESA State CA Zip Code 92626

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 11 / 2013

Transaction ID : INCA101796

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
MRS. SHIRLEY REED

Mailing Address 5431 EL DORADO DR

City HUNTINGTON BEACH State CA Zip Code 92649

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 11 / 2013

Transaction ID : INCA101797

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. EDWARD RICE

Mailing Address 19431 RUE DE VALORE #42K

City FOOTHILL RANCH State CA Zip Code 92610

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

Name of Employer HUTCHINGS COURT REPORTERS Occupation TRANSCRIPT EDITOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 11 / 2013

Transaction ID : INCA101813

Amount of Each Receipt this Period
200.00

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

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

335.00

**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 64 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. THOMAS SPARKS

Mailing Address 45001 SIERRA DR

City State Zip Code
THREE RIVERS CA 93271

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 11 / 2013

Transaction ID : INCA101815

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MS SOPHIE FARELL

Mailing Address 9110 HAPPY CAMP RD

City State Zip Code
MOORPARK CA 93021

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 13 / 2013

Transaction ID : INCA101830

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MRS. NANCY ROTH

Mailing Address 8545 CARMEL VALLEY RD

City State Zip Code
CARMEL CA 93923

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 13 / 2013

Transaction ID : INCA101823

Amount of Each Receipt this Period
500.00

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: (check only one)	PAGE 65 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. BRUCE HIGLEY

Mailing Address 880 CAMPUS COMMONS RD

City State Zip Code
SACRAMENTO CA 95825

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 15 2013

Transaction ID : INCA102961

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. MARTIN BOOYE

Mailing Address 1916 REDWOOD AVE

City State Zip Code
REDWOOD CITY CA 94061

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 16 2013

Transaction ID : INCA101838

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MRS. MARGARET CARLI

Mailing Address 8299 PARUS WAY

City State Zip Code
GRANITE BAY CA 95746

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 16 2013

Transaction ID : INCA101846

Amount of Each Receipt this Period
150.00

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

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

600.00

**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 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. HUBERT COMBS

Mailing Address PO BOX 481

City: NILAND State: CA Zip Code: 92257

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 12 / 16 / 2013

Transaction ID : INCA101884

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
MR. EUGENE CRAMER

Mailing Address 2176 VIA TECA

City: SAN CLEMENTE State: CA Zip Code: 92673

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 275.00

Date of Receipt: 12 / 16 / 2013

Transaction ID : INCA101869

Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
MS BEVERLY DI VECCHIO

Mailing Address 2825 PARKVIEW DR

City: ALHAMBRA State: CA Zip Code: 91803

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 210.00

Date of Receipt: 12 / 16 / 2013

Transaction ID : INCA101864

Amount of Each Receipt this Period: 35.00

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

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

160.00

**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 67 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. DIANE FERGUSON

Mailing Address 30448 RANCHO VIEGO RD STE 172

City State Zip Code
SAN JUAN CAPISTRAN CA 92675

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

Name of Employer Occupation
NONE NONE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 16 / 2013

Transaction ID : INCA101889

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MRS. KAY FINLAY

Mailing Address 10 LA CERRA CIR

City State Zip Code
RANCHO MIRAGE CA 92270

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 16 / 2013

Transaction ID : INCA101908

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
MR. JAMES FISHER

Mailing Address 3040 JAVA RD

City State Zip Code
COSTA MESA CA 92626

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 16 / 2013

Transaction ID : INCA101890

Amount of Each Receipt this Period
100.00

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 68 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HAMILTON FAMILY TRUST

Mailing Address 345 W MEATS AVE

City ORANGE State CA Zip Code 92865

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2013

Transaction ID : INCA101901

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. ROBERT LONG

Mailing Address 2600 E PANORAMA DR STE 303

City SIGNAL HILL State CA Zip Code 90755

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

Name of Employer Occupation
 GRAYFOX OIL CO. GEOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2013

Transaction ID : INCA101856

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. HAROLD PEASE

Mailing Address 20600 OAKSBORO CIR

City WOODLAND HILLS State CA Zip Code 91364

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

Name of Employer Occupation
 NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **370.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2013

Transaction ID : INCA101865

Amount of Each Receipt this Period
50.00

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

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

250.00

**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 69 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) MR. RAYMOND ROWE		Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2013
Mailing Address 49 E E ST		Transaction ID : INCA101835
City ENCINITAS	State CA	Zip Code 92024
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <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) MRS. VICTORIA SERRA		Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2013
Mailing Address 28101 ESPINOZA		Transaction ID : INCA101858
City MISSION VIEJO	State CA	Zip Code 92692
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation HOUSEWIFE	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) MS CARLA TRENT		Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2013
Mailing Address 324 CHESTNUT HILL CT APT 16		Transaction ID : INCA101894
City THOUSAND OAKS	State CA	Zip Code 91360
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1550.00	

SUBTOTAL of Receipts This Page (optional).....	600.00
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 70 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ANTHONY WRIGHT

Mailing Address **PO BOX 750669**

City **PETALUMA** State **CA** Zip Code **94975**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 16 / 2013

Transaction ID : INCA101892

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MRS. PATRICIA AMTOWER

Mailing Address **PO BOX 2456**

City **RANCHO SANTA FE** State **CA** Zip Code **92067**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 17 / 2013

Transaction ID : INCA101955

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MRS. LEONA BALMINO

Mailing Address **404 NAPA AVE**

City **RODEO** State **CA** Zip Code **94572**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **280.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 17 / 2013

Transaction ID : INCA102029

Amount of Each Receipt this Period
200.00

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 71 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BARNUM TIMBER COMPANY

Mailing Address PO BOX 1365

City EUREKA State CA Zip Code 95502

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

Name of Employer Occupation SOLE PROP.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA101919

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS. ANN BEHRENDT

Mailing Address 6915 GULL CT

City VENTURA State CA Zip Code 93003

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

Name of Employer Occupation NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102015

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
MR. PHILLIP BOX

Mailing Address 1125 OLIVE HILL LN

City NAPA State CA Zip Code 94558

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

Name of Employer Occupation TREES OF THE NAPA VALLEY NURSERY, GROWER OF PLANTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102038

Amount of Each Receipt this Period
100.00

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

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

900.00

**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 72 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN BUKRY

Mailing Address 3707 BRANDY ROCK WAY

City State Zip Code
REDWOOD CITY CA 94061

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 17 2013

Transaction ID : INCA101933

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
MR. DANIEL CASE

Mailing Address 1407 CASABLANCA CIR

City State Zip Code
GILROY CA 95020

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

Name of Employer Occupation
FINISAR CORPORATION ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 17 2013

Transaction ID : INCA102035

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. PARK CHAMBERLAIN

Mailing Address 21373 DEXTER DR

City State Zip Code
CUPERTINO CA 95014

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

Name of Employer Occupation
H&R BLOCK TAX PREPARER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 17 2013

Transaction ID : INCA102086

Amount of Each Receipt this Period
250.00

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

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

800.00

**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 73 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. HAROLD COFFEE

Mailing Address 25 AMBER DR

City SAN FRANCISCO State CA Zip Code 94131

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA101943

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM COLLINS

Mailing Address 1150 FLYING FISH ST

City FOSTER CITY State CA Zip Code 94404

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102019

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MRS. CAROLYN CONWAY

Mailing Address 1639 HARBOR CREST CIR

City CORONA DEL MAR State CA Zip Code 92625

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102006

Amount of Each Receipt this Period
100.00

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

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

600.00

**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 74 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBIN FAISANT

Mailing Address 750 MENLO AVE STE 250

City State Zip Code
MENLO PARK CA 94025

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

Name of Employer Occupation
ROBIN D. FAISANT, ATTORNY AT LAW ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA101964

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. HAZEL HART

Mailing Address 842 MUIRLANDS VISTA WAY

City State Zip Code
LA JOLLA CA 92037

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA101915

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MS. FRANCES HILLS

Mailing Address 467 DEODARA DR

City State Zip Code
LOS ALTOS CA 94024

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA101957

Amount of Each Receipt this Period
150.00

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

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

350.00

**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 75 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM HURDLOW

Mailing Address 7491 MINES RD

City: LIVERMORE State: CA Zip Code: 94550

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 17 / 2013

Transaction ID : INCA102082

Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
KEN AND JANICE COULSON TRUST

Mailing Address 1732 HAMER DR

City: PLACENTIA State: CA Zip Code: 92870

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 12 / 17 / 2013

Transaction ID : INCA102059

Amount of Each Receipt this Period: 150.00

C. Full Name (Last, First, Middle Initial)
MR. EDWARD KEVORKIAN

Mailing Address 966 HIGHLAND DR

City: LOS OSOS State: CA Zip Code: 93402

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 12 / 17 / 2013

Transaction ID : INCA102039

Amount of Each Receipt this Period: 75.00

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

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

525.00

**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 76 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. DOROTHY KRACK

Mailing Address 1128 TOBIAS DR

City CHULA VISTA State CA Zip Code 91911

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

Name of Employer NONE Occupation HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA101921

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. HENRY LEONARDI

Mailing Address 432 CALLE DE LA MESA

City NOVATO State CA Zip Code 94949

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

Name of Employer LEONARDI PROPERTIES Occupation PROPERTY MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA101945

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. HERBERT LEVIN

Mailing Address 724 E GRINELL DR

City BURBANK State CA Zip Code 91501

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

Name of Employer CA STATE DEPT OF JUSTICE Occupation LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102097

Amount of Each Receipt this Period
75.00

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

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

225.00

**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 77 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ARTHUR MICHELETTI

Mailing Address 25380 BECKY LN

City LOS ALTOS HILLS State CA Zip Code 94022

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102089

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MRS. JACQUELINE NEVITT

Mailing Address 6745 COLTON BLVD

City OAKLAND State CA Zip Code 94611

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA101994

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. JAMES OLIVER

Mailing Address 375 BULLARD AVE STE 1

City CLOVIS State CA Zip Code 93612

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

Name of Employer STATE FARM INSURANCE Occupation INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA101960

Amount of Each Receipt this Period
50.00

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

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

200.00

**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 78 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. DONN OLSON

Mailing Address 2730 KALMAN ST

City ACTON State CA Zip Code 93510

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

Name of Employer ANTHONY INT. Occupation TOOL MAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA101950

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
MR. MARK PLASTINO

Mailing Address 2031 ASHRIDGE WAY

City GRANITE BAY State CA Zip Code 95746

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

Name of Employer HEWLETT PACKARD Occupation FINANCE DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102115

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL POLLARD

Mailing Address 185 SENTAR RD

City CARPINTERIA State CA Zip Code 93013

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

Name of Employer SELF, MICHAEL POLLARD Occupation REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102046

Amount of Each Receipt this Period
250.00

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

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

390.00

**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 79 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. MORTON RAPPAPORT

Mailing Address 3068 DONA SUSANA DR

City State Zip Code
STUDIO CITY CA 91604

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102076

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES REBOLLINI

Mailing Address 629 BARCELONA DR

City State Zip Code
SONOMA CA 95476

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA101947

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. JAMES RHEMER

Mailing Address 40 TOPAZ WAY

City State Zip Code
SAN FRANCISCO CA 94131

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA101980

Amount of Each Receipt this Period
100.00

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

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

175.00

**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 80 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JOHN RODGERS

Mailing Address 5440 WASHINGTON ST

City NAPA State CA Zip Code 94558

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

Name of Employer NONE Occupation RETIRED MARINE ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102021

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MRS. NANCY ROTH

Mailing Address 8545 CARMEL VALLEY RD

City CARMEL State CA Zip Code 93923

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102041

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. RALPH SCRIBA

Mailing Address 2055 VIA VISALIA

City PALOS VERDES ESTAT State CA Zip Code 90274

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102009

Amount of Each Receipt this Period
500.00

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

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

1200.00

**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 81 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. BETTY SHERRY

Mailing Address 1724 W CATALPA AVE APT 320

City ANAHEIM State CA Zip Code 92801

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA101931

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH SILVA

Mailing Address 513 STARLIGHT LN

City ARROYO GRANDE State CA Zip Code 93420

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102022

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. JEFFREY SKINNER

Mailing Address PO BOX 7007

City NORTHRIDGE State CA Zip Code 91327

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

Name of Employer PRISM MANAGEMENT Occupation ACTUARY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102108

Amount of Each Receipt this Period
1000.00

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

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

1200.00

**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 82 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. TY SONNTAG

Mailing Address 215 OAK WOOD WAY

City LOS GATOS State CA Zip Code 95032

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

Name of Employer LE T INC. Occupation CONSTRUCTION SUPERVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102061

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM SPANGLER

Mailing Address 3196 N ALLEGHENY CT

City WESTLAKE VILLAGE State CA Zip Code 91362

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102054

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. W. ROBERT STOVER

Mailing Address 120 WILDWOOD GDNS

City PIEDMONT State CA Zip Code 94611

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

Name of Employer WESTAFF INC. Occupation CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA101996

Amount of Each Receipt this Period
500.00

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: (check only one)	PAGE 83 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JEFF WILSON

Mailing Address 14009 PEARDALE RD

City GRASS VALLEY State CA Zip Code 95945

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

Name of Employer A-1 DOOR Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : INCA102099

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
MR. JOHN ADELSBACH

Mailing Address 1423 KENNEDY DR

City ROSEVILLE State CA Zip Code 95678

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

Name of Employer JOHN ADELSBACH Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : INCA102194

Amount of Each Receipt this Period
 150.00

C. Full Name (Last, First, Middle Initial)
MR. DANIEL BLATT

Mailing Address 7970 S LAKE CIR

City GRANITE BAY State CA Zip Code 95746

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : INCA102191

Amount of Each Receipt this Period
 600.00

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 84 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. DANIEL BLATT

Mailing Address 7970 S LAKE CIR

City State Zip Code
GRANITE BAY CA 95746

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 18 / 2013

Transaction ID : INCA102190

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
MR. RICHARD BREESE

Mailing Address 5262 TUFTON ST

City State Zip Code
WESTMINSTER CA 92683

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
270.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 18 / 2013

Transaction ID : INCA102154

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT CRIDER

Mailing Address 8454 EL MODENA AVE

City State Zip Code
ELVERTA CA 95626

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
235.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 18 / 2013

Transaction ID : INCA102146

Amount of Each Receipt this Period
50.00

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

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

490.00

**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 85 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. NORMAN DAVIDSON

Mailing Address 139 N WESTGATE AVE

City State Zip Code
LOS ANGELES CA 90049

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 18 / 2013

Transaction ID : INCA102131

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
MR. PHILLIP DORE

Mailing Address 2414 HUNTINGTON LN

City State Zip Code
REDONDO BEACH CA 90278

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

Name of Employer Occupation
SOUTHLAND INDUSTRIES HVAC ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 18 / 2013

Transaction ID : INCA102139

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MS. SAMUEL LANGBERG

Mailing Address 1420 AMBASSADOR ST #103

City State Zip Code
LOS ANGELES CA 90035

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 18 / 2013

Transaction ID : INCA102171

Amount of Each Receipt this Period
100.00

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

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

450.00

**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 86 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM MATTOX

Mailing Address 1058 N LA CADENA DR

City State Zip Code
COLTON CA 92324

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
575.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : INCA102133

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES MCCONNELL

Mailing Address 1029 GILSTRAP AVE

City State Zip Code
GRIDLEY CA 95948

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : INCA102178

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. DAVID MCCOSKER

Mailing Address 3155 SANTA MARIA DR

City State Zip Code
CONCORD CA 94518

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

Name of Employer Occupation
INDEPENDENT CONSTRUCTION COMPANY CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : INCA102145

Amount of Each Receipt this Period
275.00

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: (check only one)	PAGE 87 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. RALPH MOORE		Date of Receipt M M / D D / Y Y Y Y 12 / 18 / 2013	
Mailing Address 570 CROCKER RD		Transaction ID : INCA102144	
City SACRAMENTO	State CA	Zip Code 95864	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) B. MR. JACK PERRIN		Date of Receipt M M / D D / Y Y Y Y 12 / 18 / 2013	
Mailing Address 500 EASTGATE LN		Transaction ID : INCA102124	
City SANTA BARBARA	State CA	Zip Code 93108	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer NONE	Occupation NONE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 725.00		

Full Name (Last, First, Middle Initial) C. E. JAMES ROGERS M.D.		Date of Receipt M M / D D / Y Y Y Y 12 / 18 / 2013	
Mailing Address 1028 LAKEHOME DR		Transaction ID : INCA102135	
City LODI	State CA	Zip Code 95242	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer NONE	Occupation RETIRED PHYSICIAN		
Receipt For: 2014 <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).....	300.00
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 88 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BEAR VALLEY SNOWMOBILE STORAGE		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2013	
Mailing Address PO BOX 5088		Transaction ID : INCA102472	
City BEAR VALLEY	State CA	Zip Code 95223	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Occupation PARTNERSHIP	
Name of Employer	Occupation PARTNERSHIP		Amount of Each Receipt this Period 300.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) B. MR. TIM BURKE		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2013	
Mailing Address 8500 LINDA CREEK CT		Transaction ID : INCA102297	
City ORANGEVALE	State CA	Zip Code 95662	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		Occupation OWNER/PRESIDENT	
Name of Employer QUEST	Occupation OWNER/PRESIDENT		Amount of Each Receipt this Period 2000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) C. MR. HOWARD CHRISTIE		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2013	
Mailing Address 26 CORRAL RD		Transaction ID : INCA102198	
City BELL CANYON	State CA	Zip Code 91307	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C		Occupation RETIRED	
Name of Employer NONE	Occupation RETIRED		Amount of Each Receipt this Period 40.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 220.00		

SUBTOTAL of Receipts This Page (optional).....	2340.00
TOTAL This Period (last page this line number only).....	2340.00

**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 89 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JAMES DAUGHERTY

Mailing Address 2000 OUTRIGGER DR

City State Zip Code
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee.

Name of Employer Occupation
FAR WEST BUSINESS SYS BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA102468

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA DOUMAS

Mailing Address 2504 N BOGUS BASIN RD

City State Zip Code
BOISE ID 83702

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA102211

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MRS. DENA FREEMAN

Mailing Address PO BOX 2002

City State Zip Code
DIAMOND SPRINGS CA 95619

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA102455

Amount of Each Receipt this Period

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)	PAGE 90 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. JEAN GILCREST

Mailing Address 26026 ADAMOR RD

City CALABASAS State CA Zip Code 91302

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : INCA102278

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MR. E. LLOYD GRAHAM

Mailing Address 4443 MOORPARK WAY APT 303

City TOLUCA LAKE State CA Zip Code 91602

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
451.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : INCA102247

Amount of Each Receipt this Period
117.00

C. Full Name (Last, First, Middle Initial)
MR. HARRY GRAY JR.

Mailing Address 142 DENSLOWE DR

City SAN FRANCISCO State CA Zip Code 94132

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : INCA102416

Amount of Each Receipt this Period
100.00

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

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

417.00

**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 91 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. DONALD GREGORY

Mailing Address 962 PATRICIA WAY

City SAN RAFAEL State CA Zip Code 94903

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
235.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : INCA102448

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
MS. MARGARET GREY

Mailing Address 100 THORNDALE DR APT 112

City SAN RAFAEL State CA Zip Code 94903

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : INCA102470

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MRS. HENRIETTE HAGMAN

Mailing Address 1172 ALTA MESA DR

City MORAGA State CA Zip Code 94556

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : INCA102302

Amount of Each Receipt this Period
100.00

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

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

675.00

**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 92 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ELLEN AND FRANK HERRMANN

Mailing Address 5630 MONTCLAIR CIR

City State Zip Code
ROCKLIN CA 95677

FEC ID number of contributing federal political committee.

Name of Employer Occupation
HERRMANN EQUIPMENT INC SELF EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA102313

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
DR. TOM LOVE

Mailing Address 5827 LA SALLE AVE

City State Zip Code
OAKLAND CA 94611

FEC ID number of contributing federal political committee.

Name of Employer Occupation
ASIAN HEALTH SERVICES ORAL SURGERY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA102458

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MICHAEL BRENT MAGNANI 2006 REV. TRUST

Mailing Address PO BOX 2112

City State Zip Code
WALNUT CREEK CA 94595

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA102301

Amount of Each Receipt this Period

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 93 OF 173
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. DIANNE SCHACK

Mailing Address 19 REATA PL

City OAKLAND State CA Zip Code 94618

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : INCA102303

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. NORMAN SNEDDON

Mailing Address 8889 HIGHWAY 49

City SONORA State CA Zip Code 95370

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : INCA102225

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
. THE CHICKASAW NATION

Mailing Address PO BOX 1548

City ADA State OK Zip Code 74820

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

Name of Employer THE CHICKASAW NATION Occupation INDIAN TRIBE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : INCA102469

Amount of Each Receipt this Period
1000.00

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)	PAGE 94 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JACK THOMAS

Mailing Address 6701 SHOO FLY RD

City State Zip Code
KELSEY CA 95667

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
215.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 19 / 2013

Transaction ID : INCA102452

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MRS. GEORGIA WIESTER

Mailing Address 7760 SANTA ROSA RD

City State Zip Code
BUELLTON CA 93427

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 19 / 2013

Transaction ID : INCA102437

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MRS. LORA BENEDICT

Mailing Address 144 LOMA ALTA DR

City State Zip Code
OCEANSIDE CA 92054

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
335.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 20 / 2013

Transaction ID : INCA102353

Amount of Each Receipt this Period
60.00

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

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

585.00

**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 95 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. LINNEA BRECUNIER

Mailing Address 5191 READ RD

City: MOORPARK State: CA Zip Code: 93021

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

Name of Employer: NONE Occupation: RETIRED TEACHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 12 / 20 / 2013

Transaction ID : INCA102392

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
MRS. PATRICIA HERRON

Mailing Address 139 LANSBERRY CT

City: LOS GATOS State: CA Zip Code: 95032

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

Name of Employer: SELF, PATRICIA A. HERRON Occupation: BOOKKEEPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 12 / 20 / 2013

Transaction ID : INCA102338

Amount of Each Receipt this Period: 150.00

C. Full Name (Last, First, Middle Initial)
MR. BILL JUNEAU

Mailing Address 601 VIA PARO

City: PALOS VERDES ESTAT State: CA Zip Code: 90274

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

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 225.00

Date of Receipt: 12 / 20 / 2013

Transaction ID : INCA102390

Amount of Each Receipt this Period: 50.00

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

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

300.00

**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 96 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. COLLEEN RICKEY

Mailing Address 860 ALOHA ST

City CAMARILLO State CA Zip Code 93010

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : INCA102351

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. ALAN SEIDENFIELD

Mailing Address 985 MARK WEST SPRINGS RD

City SANTA ROSA State CA Zip Code 95404

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : INCA102398

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. THOMAS STADE

Mailing Address 16147 TINA CT

City GRASS VALLEY State CA Zip Code 95949

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **310.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : INCA102370

Amount of Each Receipt this Period
100.00

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

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

400.00

**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 97 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) MRS. ROBIN WILLIS		Date of Receipt M M / D D / Y Y Y Y Y 12 / 20 / 2013
Mailing Address 196 QUAILS TRL		Transaction ID : INCA102334
City THOUSAND OAKS	State Zip Code CA 91361	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer NONE	Occupation HOMEMAKER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) MR. WARREN WISECARVER		Date of Receipt M M / D D / Y Y Y Y Y 12 / 20 / 2013
Mailing Address 40 ANDERSON CIR		Transaction ID : INCA102410
City WALNUT CREEK	State Zip Code CA 94595	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BISHOP-WISECARVER CORPORATION	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00	

Full Name (Last, First, Middle Initial) MS. M. GLORIA ZARAVIA		Date of Receipt M M / D D / Y Y Y Y Y 12 / 20 / 2013
Mailing Address 1425 2ND AVE SPC 132		Transaction ID : INCA102355
City CHULA VISTA	State Zip Code CA 91911	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 210.00	

SUBTOTAL of Receipts This Page (optional).....	110.00
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 98 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. SCOTT BANISTER

Mailing Address PO BOX 997

City HALF MOON BAY State CA Zip Code 94019

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

Name of Employer SELF EMPLOYED Occupation STARTUP CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 22 / 2013

Transaction ID : INCA102476

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MR. MARK HEDLUND

Mailing Address 1045 TRANQUIL HILLS CT

City PASO ROBLES State CA Zip Code 93446

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

Name of Employer P G & E Occupation SYSTEM OPERATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : INCA102521

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. WAYNE KELLY

Mailing Address 25275 LA LOMA DR

City LOS ALTOS HILLS State CA Zip Code 94022

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : INCA102481

Amount of Each Receipt this Period
100.00

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

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

175.00

**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 99 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MIYO KUNITAKE

Mailing Address 3541 GRIFFITH PARK BLVD

City LOS ANGELES State CA Zip Code 90027

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : INCA102478

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
MR. CHARLIE OLSON

Mailing Address 588 CRAWFORD DR

City SUNNYVALE State CA Zip Code 94087

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

Name of Employer C J OLSON CHERRIES Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : INCA102498

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
MS FRANCES POHORSKY

Mailing Address 12861 CHATSWORTH LN

City GRASS VALLEY State CA Zip Code 95945

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : INCA102480

Amount of Each Receipt this Period
100.00

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

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

285.00

**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 100 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JERALD SMITH

Mailing Address 3418 HEPBURN CIR

City State Zip Code
STOCKTON CA 95209

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
513.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 23 2013

Transaction ID : INCA102494

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. JACK THOMAS

Mailing Address 6701 SHOO FLY RD

City State Zip Code
KELSEY CA 95667

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
215.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 23 2013

Transaction ID : INCA102513

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
MR. BERNARD TRAWEEK

Mailing Address 6022 TIMBERLODGE LN

City State Zip Code
ROSEVILLE CA 95747

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 23 2013

Transaction ID : INCA102533

Amount of Each Receipt this Period
100.00

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

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

240.00

**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 101 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. DOUGLAS WOOD		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013	
Mailing Address 6531 KILDA CIR		Transaction ID : INCA102511	
City HUNTINGTON BEACH	State CA	Zip Code 92647	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer AEROSPACE	Occupation CONSULTANT, SEMI-RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) B. MS AUDREY BELL		Date of Receipt M M / D D / Y Y Y Y 12 / 24 / 2013	
Mailing Address 15 CLARK DR		Transaction ID : INCA102548	
City SAN MATEO	State CA	Zip Code 94401	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer AUDREY BELL INC	Occupation CPA		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		

Full Name (Last, First, Middle Initial) C. MR. PETER BROWN		Date of Receipt M M / D D / Y Y Y Y 12 / 24 / 2013	
Mailing Address 125 WINSTED CT		Transaction ID : INCA102545	
City SAN JOSE	State CA	Zip Code 95139	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer IBM CORP	Occupation PROGRAMMER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 102 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. NANCY ELBING

Mailing Address 4528 SCENIC DR

City State Zip Code
ROCKLIN CA 95765

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 24 / 2013

Transaction ID : INCA102616

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. VIRGINIA GOODRICH

Mailing Address 440 W CHINO CANYON RD

City State Zip Code
PALM SPRINGS CA 92262

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 24 / 2013

Transaction ID : INCA102593

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
MR. LEW PRICE

Mailing Address PO BOX 88

City State Zip Code
GARDEN VALLEY CA 95633

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

Name of Employer Occupation
SELF, LEW P. PRICE WRITER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 24 / 2013

Transaction ID : INCA102600

Amount of Each Receipt this Period
1000.00

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 103 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. BRUCE STRATHEARN		Date of Receipt M M / D D / Y Y Y Y 12 / 24 / 2013	
Mailing Address PO BOX 867		Transaction ID : INCA102563	
City OXNARD	State CA	Zip Code 93032	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 410.00		

Full Name (Last, First, Middle Initial) B. SLOANE ULLIMAN		Date of Receipt M M / D D / Y Y Y Y 12 / 24 / 2013	
Mailing Address 6001 LAGUNA VILLA WAY		Transaction ID : INCA102619	
City ELK GROVE	State CA	Zip Code 95758	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer COMPUTER ASSOCIATES INC.	Occupation PROPOSAL MANAGER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) C. FRANCIS WATSON		Date of Receipt M M / D D / Y Y Y Y 12 / 24 / 2013	
Mailing Address 195 DIAMOND OAKS RD		Transaction ID : INCA102603	
City ROSEVILLE	State CA	Zip Code 95678	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 104 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. GARY WEBER

Mailing Address 6519 QUINTON LN

City State Zip Code
TUJUNGA CA 91042

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 24 / 2013

Transaction ID : INCA102565

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. MARILYN BRUNELLE

Mailing Address 2356 WINDING WAY

City State Zip Code
LINCOLN CA 95648

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 27 / 2013

Transaction ID : INCA103036

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. PHILLIP DORE

Mailing Address 2414 HUNTINGTON LN

City State Zip Code
REDONDO BEACH CA 90278

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

Name of Employer Occupation
SOUTHLAND INDUSTRIES HVAC ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 27 / 2013

Transaction ID : INCA102995

Amount of Each Receipt this Period
50.00

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

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

250.00

**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 105 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. FLORENCE LA DIEU

Mailing Address **7767 CHAPARRAL WAY**

City **FAIR OAKS** State **CA** Zip Code **95628**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **913.00**

Date of Receipt
 M M / D D / Y Y Y Y
12 / 27 / 2013

Transaction ID : INCA102989

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. WHITNEY NICHOLAS

Mailing Address **8320 QUAIL OAKS DR**

City **GRANITE BAY** State **CA** Zip Code **95746**

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

Name of Employer **REQUESTED** Occupation **REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
12 / 27 / 2013

Transaction ID : INCA103038

Amount of Each Receipt this Period
600.00

C. Full Name (Last, First, Middle Initial)
MRS. DIANNE PELLISSIER

Mailing Address **15278 EL SONETO DR**

City **WHITTIER** State **CA** Zip Code **90605**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
12 / 27 / 2013

Transaction ID : INCA102988

Amount of Each Receipt this Period
500.00

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

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

1200.00

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

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

FOR LINE NUMBER: PAGE 106 OF 173
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
. SHAKOPEE MDEWAKANTON SIOUX COM

Mailing Address 2330 SIOUX TRAIL NW

City State Zip Code
PRIOR LAKE MN 55372

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

Name of Employer Occupation
SHAKOPEE MDEWAKANTON SIOUX INDIAN TRIBE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : INCA103033

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
MR. LARRY SMITH

Mailing Address 1601 DOVE ST STE 145

City State Zip Code
NEWPORT BEACH CA 92660

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

Name of Employer Occupation
MHI REAL COMPANY PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : INCA103032

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. JEFFREY STEWART

Mailing Address 2351 SUNSET BLVD STE 170

City State Zip Code
ROCKLIN CA 95765

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

Name of Employer Occupation
INTEL CORP. COMPUTER ANALYST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : INCA103017

Amount of Each Receipt this Period
100.00

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

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

2600.00

**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 107 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JACK THOMAS

Mailing Address 6701 SHOO FLY RD

City State Zip Code
KELSEY CA 95667

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
215.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 27 / 2013

Transaction ID : INCA103016

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
MR. DEREK TAYLOR

Mailing Address 1250 REDOAKS DR

City State Zip Code
SAN JOSE CA 95128

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

Name of Employer Occupation
ORACLE AMERICA, INC. SOFTWARE DEVELOPMENT MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 29 / 2013

Transaction ID : INCA102626

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. GARY BARBER

Mailing Address 10686 LOMA VISTA RD

City State Zip Code
VENTURA CA 93004

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 30 / 2013

Transaction ID : INCA102662

Amount of Each Receipt this Period
100.00

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

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

380.00

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

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

FOR LINE NUMBER: PAGE 108 OF 173
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EARLE & MARY BUNKER

Mailing Address 132 S EL MOLINO ST

City ALHAMBRA State CA Zip Code 91801

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : INCA102722

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
MRS. PAMELA BURKE

Mailing Address 445 OAK HILL TER

City LOMPOC State CA Zip Code 93436

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : INCA102656

Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
MRS. NORMA CABRAL

Mailing Address 4545 TOMPKINS AVE

City OAKLAND State CA Zip Code 94619

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : INCA102732

Amount of Each Receipt this Period
 50.00

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

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

350.00

**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 109 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. PARK CHAMBERLAIN		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013	
Mailing Address 21373 DEXTER DR		Transaction ID : INCA102763	
City CUPERTINO	State CA	Zip Code 95014	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer H&R BLOCK	Occupation TAX PREPARER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) B. MRS. HELEN CLOER		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013	
Mailing Address 2315 TREELANE AVE		Transaction ID : INCA102691	
City MONROVIA	State CA	Zip Code 91016	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) C. MR. MICHAEL HAGEN		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013	
Mailing Address PO BOX 1565		Transaction ID : INCA102769	
City CRESTLINE	State CA	Zip Code 92325	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <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).....	625.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 110 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JAMES HAWKINS

Mailing Address 3551 GRAND AVE

City SAN MARCOS State CA Zip Code 92078

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

Name of Employer EDISON INTERNATIONAL Occupation NUCLEAR COMPUTER TECH

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **340.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : INCA102657

Amount of Each Receipt this Period
50.00

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

Mailing Address 504 W BLEEKER ST

City ASPEN State CO Zip Code 81611

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : INCA102768

Amount of Each Receipt this Period
2600.00

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

Mailing Address 504 W BLEEKER ST

City ASPEN State CO Zip Code 81611

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : INCA102767

Amount of Each Receipt this Period
2600.00

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

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

5250.00

**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 111 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAYNE & DENNIS HORN

Mailing Address 5211 MOUNT ARIANE TER

City SAN DIEGO State CA Zip Code 92111

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **285.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : INCA102742

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
MRS. LYNN KYME

Mailing Address 7980 W HIDDEN LAKES DR

City GRANITE BAY State CA Zip Code 95746

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : INCA102639

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM LOCKE

Mailing Address 15012 LOS LOTES AVE

City WHITTIER State CA Zip Code 90605

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : INCA102661

Amount of Each Receipt this Period
50.00

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

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

185.00

**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 112 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. CHARLOTTE MAECK

Mailing Address 2585 PACIFIC AVE

City SAN FRANCISCO State CA Zip Code 94115

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

Name of Employer NONE Occupation HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : INCA102734

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
SUSAN MC NEAR

Mailing Address 19 LA CRESCENTA WAY

City SAN RAFAEL State CA Zip Code 94901

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : INCA102700

Amount of Each Receipt this Period
1000.00

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

Mailing Address 18031 DEBI LN

City YORBA LINDA State CA Zip Code 92886

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

Name of Employer TO'S TILE INC. Occupation TILE SELLER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : INCA102687

Amount of Each Receipt this Period
100.00

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

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

1150.00

**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 113 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MS MAUREEN O'NEILL		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013	
Mailing Address 1810 ALDEN ST		Transaction ID : INCA102653	
City BELMONT	State CA	Zip Code 94002	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		C	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00		

Full Name (Last, First, Middle Initial) B. MR. LEONARD PERHAM		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013	
Mailing Address PO BOX 2610		Transaction ID : INCA102670	
City SARATOGA	State CA	Zip Code 95070	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer MOSYS INC.	Occupation EXECUTIVE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 875.00		

Full Name (Last, First, Middle Initial) C. JOHN PHILLIPS		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013	
Mailing Address PO BOX 1750		Transaction ID : INCA102751	
City MANHATTAN BEACH	State CA	Zip Code 90267	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <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).....	_____ 850.00
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 114 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MS. LIZ SCHROETER

Mailing Address 1722 LAPORTE DR

City ROSEVILLE State CA Zip Code 95747

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : INCA102765

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. ROBERT SHAVELLE

Mailing Address 13020 SAN SALVADOR PL

City CERRITOS State CA Zip Code 90703

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

Name of Employer SELF - ROBERT SHAVELLE Occupation CONSULTANT ON LIFE EXPECTANCY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : INCA102674

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT TREFZGER

Mailing Address 10200 MT VERNON RD

City AUBURN State CA Zip Code 95603

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : INCA102720

Amount of Each Receipt this Period
50.00

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

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

1150.00

**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 115 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN VAILLANCOURT M.D.

Mailing Address 443 CRESTMONT DR

City State Zip Code
SAN FRANCISCO CA 94131

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 30 2013

Transaction ID : INCA102655

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
MR. FRANK VANSKIKE

Mailing Address 380 AILANTHUS LN

City State Zip Code
PLACERVILLE CA 95667

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 30 2013

Transaction ID : INCA102729

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MRS. CAROL WILSON

Mailing Address 2197 SUTTER VIEW LN

City State Zip Code
LINCOLN CA 95648

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1075.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 30 2013

Transaction ID : INCA102764

Amount of Each Receipt this Period
100.00

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

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

275.00

**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 116 OF 173
	<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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. DONALD GREGORY

Mailing Address 962 PATRICIA WAY

City SAN RAFAEL State CA Zip Code 94903

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : INCA102777

Amount of Each Receipt this Period
55.00

B. Full Name (Last, First, Middle Initial)
DR. COREY MAAS

Mailing Address 12752 CALEB DR

City TRUCKEE State CA Zip Code 96161

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

Name of Employer TMC Occupation SURGEON

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : INCA102798

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. PAUL 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 EXECUTIVE OFFICE Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : INCA102786

Amount of Each Receipt this Period
250.00

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

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

555.00

78899.00

**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 117 OF 173	
	<input type="checkbox"/> 11a 12	<input checked="" 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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARIPOSA COUNTY REPUBLICAN CENTRAL COMM. FED

Mailing Address PO BOX 663

City State Zip Code
MARIPOSA CA 95338

FEC ID number of contributing federal political committee. **C** C00455725

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 15 / 2013

Transaction ID : INCA101080

Amount of Each Receipt this Period
350.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

350.00

350.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. U.S. POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 5515 PACIFIC ST		Amount of Each Disbursement this Period 5.80
City Rocklin	State CA	
Zip Code 95677	Purpose of Disbursement POSTAGE	Transaction ID : EXPB100693
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.50
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB100692
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CHASE BANK		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 801 K ST. #110		Amount of Each Disbursement this Period 142.57
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement BANK FEE	Transaction ID : EXPB100706
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	150.87
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 119 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 51.73
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB100668
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 60.00
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB100669
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address P. O. BOX 6463		Amount of Each Disbursement this Period 115.26
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC.	Transaction ID : EXPB100354
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	226.99
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 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DAVID BAUER		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 2150 RIVER PLAZA DR. #150		Amount of Each Disbursement this Period 423.20
City SACRAMENTO State CA Zip Code 95833	Purpose of Disbursement ACCOUNTING SVC. Category/Type 001	
Candidate Name		Transaction ID : EXPB100353
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FIA CARD SERVICES		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address P. O. BOX 15716		Amount of Each Disbursement this Period 229.49
City WILMINGTON State DE Zip Code 19886	Purpose of Disbursement CREDIT CARD PAYMENT Category/Type 002	
Candidate Name		Transaction ID : EXPB100352
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NATIONAL CAR RENTAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 560 BESSIE COLEMAN DR.		Amount of Each Disbursement this Period 95.24
City CHICAGO State IL Zip Code 60666	Purpose of Disbursement CAR RENTAL Category/Type 002	
Candidate Name		Transaction ID : EDTB288EXPB100352
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	652.69
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 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BLACK BEAR DINER		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 13365 LINCOLN WAY		Amount of Each Disbursement this Period 34.40
City AUBURN State CA Zip Code 95603	Purpose of Disbursement MEAL 002 Category/Type	
Candidate Name		Transaction ID : EDTB289EXPB100352 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CHARLIE PALMER STEAK HOUSE		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 101 CONSTITUTION AVE. NW		Amount of Each Disbursement this Period 99.85
City WASHINGTON State DC Zip Code 20001	Purpose of Disbursement MEETING 001 Category/Type	
Candidate Name		Transaction ID : EDTB290EXPB100352 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.74
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name		Transaction ID : EXPB100691
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.74
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 122 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STATE COMPENSATION INSURANCE FUND		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address P. O. BOX 748170		Amount of Each Disbursement this Period 210.25 Transaction ID : EXPB100351
City LOS ANGELES	State CA	
Zip Code 90074	Purpose of Disbursement INSURANCE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SUREWEST		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address P. O. BOX 30697		Amount of Each Disbursement this Period 260.43 Transaction ID : EXPB100350
City LOS ANGELES	State CA	
Zip Code 90030	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. TERRA ECLIPSE		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 9043 SOQUEL DR.		Amount of Each Disbursement this Period 5000.00 Transaction ID : EXPB100349
City Aptos	State CA	
Zip Code 95003	Purpose of Disbursement FUNDRAISING ADVICE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5470.68
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 123 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.50 Transaction ID : EXPB100690
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 6.23 Transaction ID : EXPB100689
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 330 VERNON ST.		Amount of Each Disbursement this Period 5.60 Transaction ID : EXPB100695
City ROSEVILLE State CA Zip Code 95678	Purpose of Disbursement POSTAGE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	14.33
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 124 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STOR N LOK		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 21 MASSIE CT.		Amount of Each Disbursement this Period 140.00
City SACRAMENTO	State CA	
Zip Code 95828	Purpose of Disbursement STORAGE	Transaction ID : EXPB100696
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PARKWAY PLAZA INVESTORS		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2013
Mailing Address P.O. BOX 670		Amount of Each Disbursement this Period 1293.00
City Roseville	State CA	
Zip Code 95678	Purpose of Disbursement RENT	Transaction ID : EXPB100451
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 8.42
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB100688
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1441.42
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 125 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VOTE RITE SYSTEMS, INC.			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2013	
Mailing Address 3440 VIKING DR. #105			Amount of Each Disbursement this Period 748.20	
City SACRAMENTO	State CA	Zip Code 95827	Transaction ID : EXPB100450	
Purpose of Disbursement DATA PROCESSING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 13.42	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB100687	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. MR. JON HUEY			Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013	
Mailing Address PO BOX 1198			Amount of Each Disbursement this Period 1747.22	
City ROCKLIN	State CA	Zip Code 95677	Transaction ID : EXPB100535	
Purpose of Disbursement PAYROLL		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2508.84
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 126 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2013	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 1.70	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB100686	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2013	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 110.30	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB100685	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) C. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 1.38	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB100684	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	113.38
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 127 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PUBLIC STORAGE		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 715 CIRBY WAY		Amount of Each Disbursement this Period 64.00 Transaction ID : EXPB100698
City Roseville	State CA	
Zip Code 95678	Purpose of Disbursement STORAGE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 5.85 Transaction ID : EXPB100683
City San Jose	State CA	
Zip Code 95125	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 12.14 Transaction ID : EXPB100682
City San Jose	State CA	
Zip Code 95125	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	81.99
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 128 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE MONACO GROUP		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 1011 S. LINWOOD AVE.		Amount of Each Disbursement this Period 12275.40 Transaction ID : EXPB100542
City SANTA ANA State CA Zip Code 92705	Purpose of Disbursement MASS MAIL Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. TORTILLA COAST		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 400 1ST ST. SE		Amount of Each Disbursement this Period 68.18 Transaction ID : EXPB100699
City Washington State DC Zip Code 20003	Purpose of Disbursement MEETING Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.85 Transaction ID : EXPB100681
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	12344.43
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 129 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VOTERLINK		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 13348 ALPINE COVE DR.		Amount of Each Disbursement this Period 641.49
City ALPINE State UT Zip Code 84004	Purpose of Disbursement MAILING LIST 004 Category/Type	
Candidate Name		Transaction ID : EXPB100701
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. VOTERLINK		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 13348 ALPINE COVE DR.		Amount of Each Disbursement this Period 223.30
City ALPINE State UT Zip Code 84004	Purpose of Disbursement MAILING LIST 004 Category/Type	
Candidate Name		Transaction ID : EXPB100700
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.50
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name		Transaction ID : EXPB100680
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	867.29
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 130 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2013	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 0.63	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB100679	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 0.85	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB100678	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. AT&T			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013	
Mailing Address P. O. BOX 5025			Amount of Each Disbursement this Period 293.33	
City CAROL STREAM	State IL	Zip Code 60197	Transaction ID : EXPB100568	
Purpose of Disbursement PHONE SVC		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	294.81
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 131 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address P. O. BOX 6463		Amount of Each Disbursement this Period 892.00 Transaction ID : EXPB100569
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <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 10 / 22 / 2013
Mailing Address 2150 RIVER PLAZA DR. #150		Amount of Each Disbursement this Period 626.75 Transaction ID : EXPB100570
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CAPITAL DEVELOPMENT STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 1127 11TH ST. #310		Amount of Each Disbursement this Period 150.00 Transaction ID : EXPB100571
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement SOFTWARE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	892.00
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 132 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.50 Transaction ID : EXPB100677
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. TERRA ECLIPSE		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 9043 SOQUEL DR.		Amount of Each Disbursement this Period 5000.00 Transaction ID : EXPB100573
City Aptos State CA Zip Code 95003	Purpose of Disbursement FUNDRAISING ADVICE 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.88 Transaction ID : EXPB100676
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5003.38
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 133 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. POSTMASTER		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 4120 DOUGLAS BLVD.		Amount of Each Disbursement this Period 5.60
City GRANITE BAY	State CA	
Zip Code 95746	Purpose of Disbursement POSTAGE	Transaction ID : EXPB100702
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. WE THE PIZZA		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 305 PENNSYLVANIA AVE.		Amount of Each Disbursement this Period 44.40
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement MEETING	Transaction ID : EXPB100703
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.85
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB100675
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	50.85
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 134 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.50 Transaction ID : EXPB100674
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MAILCHIMP.COM		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 512 MEANS ST. #404		Amount of Each Disbursement this Period 235.00 Transaction ID : EXPB100704
City ATLANTA State GA Zip Code 30318	Purpose of Disbursement BROADCAST E-MAIL 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 1.14 Transaction ID : EXPB100673
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	238.64
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 135 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 1.40 Transaction ID : EXPB100672
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. EMPLOYMENT DEVELOPMENT DEPT.		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address P. O. BOX 826276		Amount of Each Disbursement this Period 259.06 Transaction ID : EXPB100637
City SACRAMENTO State CA Zip Code 94230	Purpose of Disbursement TAXES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MR. JON HUEY		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address PO BOX 1198		Amount of Each Disbursement this Period 1747.22 Transaction ID : EXPB100638
City ROCKLIN State CA Zip Code 95677	Purpose of Disbursement PAYROLL 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2007.68
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 136 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. INTERNAL REVENUE SVC.		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address		Amount of Each Disbursement this Period 1629.00 Transaction ID : EXPB100636
City OGDEN	State UT	
Zip Code 84201	Purpose of Disbursement TAXES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 1.70 Transaction ID : EXPB100671
City San Jose	State CA	
Zip Code 95125	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 11.25 Transaction ID : EXPB100670
City San Jose	State CA	
Zip Code 95125	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1641.95
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 137 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.61 Transaction ID : EXPB101622
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 17.50 Transaction ID : EXPB101623
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address P. O. BOX 537104		Amount of Each Disbursement this Period 85.46 Transaction ID : EXPB100650
City ATLANTA State GA Zip Code 30353	Purpose of Disbursement PHONE SVC. 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	103.57
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 138 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FIA CARD SERVICES		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address P. O. BOX 15716		Amount of Each Disbursement this Period 101.24 Transaction ID : EXPB100649
City WILMINGTON	State DE	
Zip Code 19886	Purpose of Disbursement CREDIT CARD PAYMENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address 300 FIRST ST. SE		Amount of Each Disbursement this Period 101.24 Transaction ID : EDTB291EXPB100649 [MEMO ITEM]
City WASHINGTON	State DC	
Zip Code 20006	Purpose of Disbursement MEETING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PARKWAY PLAZA INVESTORS		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address P.O. BOX 670		Amount of Each Disbursement this Period 1293.00 Transaction ID : EXPB100647
City Roseville	State CA	
Zip Code 95678	Purpose of Disbursement RENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1394.24
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 139 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.93 Transaction ID : EXPB101624
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SUREWEST		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address P. O. BOX 30697		Amount of Each Disbursement this Period 270.37 Transaction ID : EXPB100646
City LOS ANGELES State CA Zip Code 90030	Purpose of Disbursement PHONE SVC. 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. TIM MACY & ASSOC.		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address 7996 CALIFORNIA AVE. #F		Amount of Each Disbursement this Period 824.48 Transaction ID : EXPB100648
City FAIR OAKS State CA Zip Code 95628	Purpose of Disbursement MASS MAIL 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1095.78
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 140 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VOTE RITE SYSTEMS, INC.			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013	
Mailing Address 3440 VIKING DR. #105			Amount of Each Disbursement this Period 795.37	
City SACRAMENTO	State CA	Zip Code 95827	Transaction ID : EXPB100645	
Purpose of Disbursement DATA PROCESSING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 60.00	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB101621	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 13.40	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB101625	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	868.77
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 141 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHASE BANK		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address 801 K ST. #110		Amount of Each Disbursement this Period 99.37
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement BANK FEE	Transaction ID : EXPB101620
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CAMPAIGN FINANCIAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 4905 DEL RAY AVE. #401		Amount of Each Disbursement this Period 1190.00
City BETHESDA	State MD	
Zip Code 20814	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : EXPB101605
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.93
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB101626
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1290.30
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 142 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.43 Transaction ID : EXPB101627
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 1.60 Transaction ID : EXPB101628
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 3.50 Transaction ID : EXPB101629
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5.53
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 143 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. STOR N LOK

Mailing Address 21 MASSIE CT.

City SACRAMENTO State CA Zip Code 95828

Purpose of Disbursement STORAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 13 / 2013

Amount of Each Disbursement this Period: 140.00

Transaction ID : EXPB101607

Category/Type: 001

Full Name (Last, First, Middle Initial)
B. U.S. POSTAL SERVICE

Mailing Address 5515 PACIFIC ST

City Rocklin State CA Zip Code 95677

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 13 / 2013

Amount of Each Disbursement this Period: 0.46

Transaction ID : EXPB101606

Category/Type: 001

Full Name (Last, First, Middle Initial)
C. MR. JON HUEY

Mailing Address PO BOX 1198

City ROCKLIN State CA Zip Code 95677

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 14 / 2013

Amount of Each Disbursement this Period: 1747.22

Transaction ID : EXPB101643

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 1887.68

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 144 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 7.23
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB101630
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <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 11 / 15 / 2013
Mailing Address 2150 RIVER PLAZA DR. #150		Amount of Each Disbursement this Period 655.50
City SACRAMENTO	State CA	
Zip Code 95833	Purpose of Disbursement ACCOUNTING SVC.	Transaction ID : EXPB100723
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 19.40
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB101631
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	682.13
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 145 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

A. PUBLIC STORAGE

Full Name (Last, First, Middle Initial)
Mailing Address 715 CIRBY WAY

City Roseville State CA Zip Code 95678

Purpose of Disbursement STORAGE
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 15 / 2013

Amount of Each Disbursement this Period: 64.00
Transaction ID : EXPB101608

Category/Type: 001

B. THE MONACO GROUP

Full Name (Last, First, Middle Initial)
Mailing Address 1011 S. LINWOOD AVE.

City SANTA ANA State CA Zip Code 92705

Purpose of Disbursement MASS MAIL
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 15 / 2013

Amount of Each Disbursement this Period: 11889.75
Transaction ID : EXPB100722

Category/Type: 003

C. U.S. POSTAL SVC.

Full Name (Last, First, Middle Initial)
Mailing Address 2000 ROYAL OAKS DR.

City SACRAMENTO State CA Zip Code 95813

Purpose of Disbursement BOX RENTAL
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 15 / 2013

Amount of Each Disbursement this Period: 268.00
Transaction ID : EXPB100721

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 12221.75

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 146 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.55 Transaction ID : EXPB101632
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 8.46 Transaction ID : EXPB101633
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. U.S. POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 5515 PACIFIC ST		Amount of Each Disbursement this Period 11.60 Transaction ID : EXPB101614
City Rocklin State CA Zip Code 95677	Purpose of Disbursement POSTAGE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	20.61
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 147 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. U.S. POSTAL SVC.		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 2000 ROYAL OAKS DR.		Amount of Each Disbursement this Period 1000.00 Transaction ID : EXPB100724
City SACRAMENTO	State CA	
Zip Code 95813	Purpose of Disbursement MASS MAIL	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address SACRAMENTO INT'L AIRPORT		Amount of Each Disbursement this Period 765.90 Transaction ID : EXPB101610
City SACRAMENTO	State CA	
Zip Code 95838	Purpose of Disbursement AIRFARE	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address SACRAMENTO INT'L AIRPORT		Amount of Each Disbursement this Period 288.80 Transaction ID : EXPB101612
City SACRAMENTO	State CA	
Zip Code 95838	Purpose of Disbursement AIRFARE	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2054.70
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 148 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address SACRAMENTO INT'L AIRPORT		Amount of Each Disbursement this Period 69.00
City SACRAMENTO	State CA	
Zip Code 95838	Purpose of Disbursement AIRFARE	Transaction ID : EXPB101611
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address SACRAMENTO INT'L AIRPORT		Amount of Each Disbursement this Period 288.80
City SACRAMENTO	State CA	
Zip Code 95838	Purpose of Disbursement AIRFARE	Transaction ID : EXPB101613
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 27.03
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB101634
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	384.83
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 149 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HOUSE GIFT SHOP		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address HOUSE OF REPRESENTATIVES		Amount of Each Disbursement this Period 1650.00 Transaction ID : EXPB101616
City Washington State DC Zip Code 20515	Purpose of Disbursement CHRISTMAS CARDS Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 70.07 Transaction ID : EXPB101635
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 28.61 Transaction ID : EXPB101636
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1748.68
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 150 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHICAGO FIRE		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 500 N. SUNRISE AVE.		Amount of Each Disbursement this Period 375.48 Transaction ID : EXPB101617
City ROSEVILLE	State CA	
Zip Code 95661	Purpose of Disbursement MEETING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 27.66 Transaction ID : EXPB101637
City San Jose	State CA	
Zip Code 95125	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. SALESFORCE.COM		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 1 MARKET ST. #300		Amount of Each Disbursement this Period 375.00 Transaction ID : EXPB101618
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement SOFTWARE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	778.14
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 151 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE MONACO GROUP			Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013	
Mailing Address 1011 S. LINWOOD AVE.			Amount of Each Disbursement this Period 9783.36	
City SANTA ANA	State CA	Zip Code 92705	Transaction ID : EXPB101353	
Purpose of Disbursement MASS MAIL		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2013	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 1.86	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB101638	
Purpose of Disbursement MERCHANT FEE		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2013	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 1.81	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB101639	
Purpose of Disbursement MERCHANT FEE		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	9787.03
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 152 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.93 Transaction ID : EXPB101640
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address P. O. BOX 5025		Amount of Each Disbursement this Period 306.71 Transaction ID : EXPB101472
City CAROL STREAM State IL Zip Code 60197	Purpose of Disbursement PHONE SVC. 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address P. O. BOX 537104		Amount of Each Disbursement this Period 85.46 Transaction ID : EXPB101471
City ATLANTA State GA Zip Code 30353	Purpose of Disbursement PHONE SVC. 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	393.10
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 153 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address P. O. BOX 6463		Amount of Each Disbursement this Period 115.27
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC	Transaction ID : EXPB101470
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <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		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 1127 11TH ST. #310		Amount of Each Disbursement this Period 150.46
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement MAILING LIST	Transaction ID : EXPB101469
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. EMPLOYMENT DEVELOPMENT DEPT.		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address P. O. BOX 826276		Amount of Each Disbursement this Period 259.06
City SACRAMENTO	State CA	
Zip Code 94230	Purpose of Disbursement TAXES	Transaction ID : EXPB101466
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	524.79
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 154 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. JON HUEY			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013	
Mailing Address PO BOX 1198			Amount of Each Disbursement this Period 1747.22	
City ROCKLIN	State CA	Zip Code 95677	Transaction ID : EXPB101467	
Purpose of Disbursement PAYROLL		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. INTERNAL REVENUE SVC.			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013	
Mailing Address			Amount of Each Disbursement this Period 1629.00	
City OGDEN	State UT	Zip Code 84201	Transaction ID : EXPB101465	
Purpose of Disbursement TAXES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 0.93	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB101641	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3377.15
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 155 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TERRA ECLIPSE		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 9043 SOQUEL DR.		Amount of Each Disbursement this Period 5000.00
City Aptos State CA Zip Code 95003	Purpose of Disbursement FUNDRAISING CONSULTING 003 Category/Type	
Candidate Name		Transaction ID : EXPB101468
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MAILCHIMP.COM		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address 512 MEANS ST. #404		Amount of Each Disbursement this Period 235.00
City ATLANTA State GA Zip Code 30318	Purpose of Disbursement BROADCAST E-MAIL 004 Category/Type	
Candidate Name		Transaction ID : EXPB101619
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 9.68
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name		Transaction ID : EXPB101642
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5244.68
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 156 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 28.58
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name		Transaction ID : EXPB102938
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. ARISTOTLE INTERNATIONAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 205 PENNSYLVANIA AVE. SE		Amount of Each Disbursement this Period 4000.00
City Washington State DC Zip Code 20003	Purpose of Disbursement SOFTWARE	
Candidate Name		Transaction ID : EXPB102925
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.80
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name		Transaction ID : EXPB102939
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	4031.38
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 157 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 60.00
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name		Transaction ID : EXPB102935
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. STOR N LOK		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 21 MASSIE CT.		Amount of Each Disbursement this Period 140.00
City SACRAMENTO State CA Zip Code 95828	Purpose of Disbursement STORAGE	
Candidate Name		Transaction ID : EXPB102924
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. CHASE BANK		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 801 K ST. #110		Amount of Each Disbursement this Period 213.41
City SACRAMENTO State CA Zip Code 95814	Purpose of Disbursement BANK FEES	
Candidate Name		Transaction ID : EXPB102937
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	413.41
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 158 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DELUXE BUSINESS FORMS			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013	
Mailing Address P. O. BOX 742572			Amount of Each Disbursement this Period 9602.02	
City CINCINNATI	State OH	Zip Code 45274	Transaction ID : EXPB102936	
Purpose of Disbursement SUPPLIES		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. SIERRA			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013	
Mailing Address 9950 HORN RD.			Amount of Each Disbursement this Period 9388.00	
City SACRAMENTO	State CA	Zip Code 95827	Transaction ID : EXPB101604	
Purpose of Disbursement MASS MAIL		Category/ Type 003		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 27.15	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB102940	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	9602.02
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 159 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 3.73
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name	001 Category/Type	Transaction ID : EXPB102941
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CRISWELL ASSOCIATES		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 847 SANSOME ST. #200		Amount of Each Disbursement this Period 2700.00
City SAN FRANCISCO State CA Zip Code 94111	Purpose of Disbursement RADIO ADVERTISING	
Candidate Name	004 Category/Type	Transaction ID : EXPB101785
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PARKWAY PLAZA INVESTORS		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address P.O. BOX 670		Amount of Each Disbursement this Period 1293.00
City Roseville State CA Zip Code 95678	Purpose of Disbursement RENT	
Candidate Name	001 Category/Type	Transaction ID : EXPB101783
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3996.73
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 160 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

A. PAYPAL

Full Name (Last, First, Middle Initial)
Mailing Address 2145 Hamilton Avenue

City San Jose State CA Zip Code 95125

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 11 / 2013

Amount of Each Disbursement this Period: 27.28

Transaction ID : EXPB102942

Category/Type: 001

B. SUREWEST

Full Name (Last, First, Middle Initial)
Mailing Address P. O. BOX 30697

City LOS ANGELES State CA Zip Code 90030

Purpose of Disbursement
PHONE SVC.

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 11 / 2013

Amount of Each Disbursement this Period: 286.49

Transaction ID : EXPB101782

Category/Type: 001

C. TIM MACY & ASSOC.

Full Name (Last, First, Middle Initial)
Mailing Address 7996 CALIFORNIA AVE. #F

City FAIR OAKS State CA Zip Code 95628

Purpose of Disbursement
MASS MAIL

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 11 / 2013

Amount of Each Disbursement this Period: 823.84

Transaction ID : EXPB101784

Category/Type: 003

SUBTOTAL of Disbursements This Page (optional) 1137.61

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 161 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. U.S. POSTAL SERVICE			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013	
Mailing Address 5515 PACIFIC ST			Amount of Each Disbursement this Period 235.20	
City Rocklin	State CA	Zip Code 95677	Transaction ID : EXPB102928	
Purpose of Disbursement POSTAGE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. VOTE RITE SYSTEMS, INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013	
Mailing Address 3440 VIKING DR. #105			Amount of Each Disbursement this Period 1358.28	
City SACRAMENTO	State CA	Zip Code 95827	Transaction ID : EXPB101781	
Purpose of Disbursement DATA PROCESSING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. MR. JON HUEY			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013	
Mailing Address PO BOX 1198			Amount of Each Disbursement this Period 1747.22	
City ROCKLIN	State CA	Zip Code 95677	Transaction ID : EXPB101811	
Purpose of Disbursement PAYROLL		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3340.70
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 162 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 7.16
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 5.79
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 12.53
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	25.48
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 163 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 1.55 Transaction ID : EXPB102946
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PUBLIC STORAGE		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 715 CIRBY WAY		Amount of Each Disbursement this Period 64.00 Transaction ID : EXPB102930
City Roseville State CA Zip Code 95678	Purpose of Disbursement STORAGE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 116.51 Transaction ID : EXPB102947
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	182.06
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 164 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FIA CARD SERVICES		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address P. O. BOX 15716		Amount of Each Disbursement this Period 48.50
City WILMINGTON	State DE	
Zip Code 19886	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : EXPB102103
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 300 FIRST ST. SE		Amount of Each Disbursement this Period 25.00
City WASHINGTON	State DC	
Zip Code 20006	Purpose of Disbursement MEETING	Transaction ID : EDTB292EXPB102103
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 1.86
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB102948
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	50.36
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 165 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE MONACO GROUP			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013	
Mailing Address 1011 S. LINWOOD AVE.			Amount of Each Disbursement this Period 40951.72	
City SANTA ANA	State CA	Zip Code 92705	Transaction ID : EXPB102102	
Purpose of Disbursement MASS MAIL		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 2.49	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB102949	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 20.01	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB102950	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	40974.22
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 166 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. U.S. POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 5515 PACIFIC ST		Amount of Each Disbursement this Period 224.00
City Rocklin	State CA	
Zip Code 95677	Purpose of Disbursement POSTAGE	Transaction ID : EXPB102932
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. U.S. POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 5515 PACIFIC ST		Amount of Each Disbursement this Period 5.60
City Rocklin	State CA	
Zip Code 95677	Purpose of Disbursement POSTAGE	Transaction ID : EXPB102931
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.88
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB102951
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	230.48
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 167 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.88 Transaction ID : EXPB102952
City San Jose	State CA	
Zip Code 95125	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.88 Transaction ID : EXPB102953
City San Jose	State CA	
Zip Code 95125	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. THE CONGRESSIONAL INSTITUTE		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 316 PENNSYLVANIA AVE. #403		Amount of Each Disbursement this Period 890.00 Transaction ID : EXPB102933
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement CONFERENCE FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	891.76
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 168 OF 173	
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.88 Transaction ID : EXPB102954
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 25 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.93 Transaction ID : EXPB102955
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. EMPLOYMENT DEVELOPMENT DEPT.		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address P. O. BOX 826276		Amount of Each Disbursement this Period 259.06 Transaction ID : EXPB102622
City SACRAMENTO State CA Zip Code 94230	Purpose of Disbursement TAXES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	260.87
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 169 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. JON HUEY		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address PO BOX 1198		Amount of Each Disbursement this Period 1747.22
City ROCKLIN	State CA	
Zip Code 95677	Purpose of Disbursement PAYROLL	Transaction ID : EXPB102620
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. INTERNAL REVENUE SVC.		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address		Amount of Each Disbursement this Period 1629.00
City OGDEN	State UT	
Zip Code 84201	Purpose of Disbursement TAXES	Transaction ID : EXPB102621
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MAILCHIMP.COM		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 512 MEANS ST. #404		Amount of Each Disbursement this Period 235.00
City ATLANTA	State GA	
Zip Code 30318	Purpose of Disbursement BROADCAST E-MAIL	Transaction ID : EXPB102934
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3611.22
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 170 OF 173			
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.80 Transaction ID : EXPB102956
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 7.48 Transaction ID : EXPB102957
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 265.89 Transaction ID : EXPB102958
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	274.17
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 171 OF 173		
	<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)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement
Mailing Address 2145 Hamilton Avenue		M M / D D / Y Y Y Y 12 / 31 / 2013
City San Jose	State CA	Zip Code 95125
Purpose of Disbursement MERCHANT FEE	Category/Type 001	Amount of Each Disbursement this Period 33.02
Candidate Name	Transaction ID : EXPB102959	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <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
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
Purpose of Disbursement	Category/Type	Amount of Each Disbursement this Period
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
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
Purpose of Disbursement	Category/Type	Amount of Each Disbursement this Period
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).....	33.02
TOTAL This Period (last page this line number only).....	146921.93

**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 172 OF 173	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CARL DEMAIO FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address P. O. BOX 27227		Amount of Each Disbursement this Period 2000.00 Transaction ID : EXPB102104
City SAN DIEGO	State CA	
Zip Code 92198	Purpose of Disbursement 011 Category/ Type	
Candidate Name CARL DEMAIO	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 52	

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	Purpose of Disbursement	
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	Purpose of Disbursement	
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).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00

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)

MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UPS

Mailing Address P. O. BOX 894820

City State Zip Code
LOS ANGELES CA 90189

Nature of Debt (Purpose):
SHIPPING

Outstanding Balance Beginning This Period **67.02** Transaction ID : **PAYD100346**

Amount Incurred This Period **0.00** Payment This Period **67.02** Outstanding Balance at Close of This Period **0.00**

B. 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

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)	0.00
2) TOTALS This Period (last page this line number only)	0.00
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) ▶	