

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Francisco 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))....	81675.00	107875.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	81675.00	107875.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	39598.18	41403.18
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	39598.18	41403.18
8. Cash on Hand at Close of Reporting Period (from Line 27).....	66471.82	
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).....	31232.31	

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

Francisco 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).....	79450.00	105650.00
(ii) Unitemized.....	2225.00	2225.00
(iii) TOTAL of contributions from individuals ▶	81675.00	107875.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	81675.00	107875.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	81675.00	107875.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	39598.18	41403.18
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	39598.18	41403.18

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	24395.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	81675.00
25. SUBTOTAL (add Line 23 and Line 24).....	106070.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	39598.18
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	66471.82

**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 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Loyd Applegate

Mailing Address 2065 Mission Ridge S. Road

City Santa Barbara State CA Zip Code 93103

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

Name of Employer .Information Requested Occupation .Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40410.C660

Amount of Each Receipt this Period
 Receipt 1000.00

B. Full Name (Last, First, Middle Initial)
Christopher Arend

Mailing Address 9610 Nacimiento Lake Drive

City Paso Robles State CA Zip Code 93446

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

Name of Employer Arend Law Firm Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40410.C656

Amount of Each Receipt this Period
 Receipt 1000.00

C. Full Name (Last, First, Middle Initial)
Terry Bartlett

Mailing Address 434 Plaza Rubio

City Santa Barbara State CA Zip Code 93103

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

Name of Employer Reetz Fox & Bartlett Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2014

Transaction ID : 40131.C581

Amount of Each Receipt this Period
 Receipt 1000.00

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

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

3000.00

**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 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Helene Beaver

Mailing Address PO Box 1230

City Santa Barbara State CA Zip Code 93102

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 08 / 2014

Transaction ID : 40214.C595

Amount of Each Receipt this Period
 Receipt 250.00

B. Full Name (Last, First, Middle Initial)
Brenda Blalock

Mailing Address 865 Buena Vista Avenue

City Santa Barbara State CA Zip Code 93108

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

Name of Employer Coldwell Banker Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : 40314.C643

Amount of Each Receipt this Period
 Receipt 500.00

C. Full Name (Last, First, Middle Initial)
Spumoni Holding Co. LLC

Mailing Address PO Box 4127

City Santa Barbara State CA Zip Code 93140

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : 40228.C631

Amount of Each Receipt this Period
 Receipt 2500.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Mario Borgatello

Mailing Address **PO Box 4127**

City **Santa Barbara** State **CA** Zip Code **93140**

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

Name of Employer **Spumoni Holding Co. LLC** Occupation **Partner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 28 / 2014

Transaction ID : 40411.C666

Amount of Each Receipt this Period
2500.00

Memo
**[MEMO ITEM]
Partnership->Spumoni Holding Co. LLC Partnership**

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

Mailing Address **812 State Street**

City **Santa Barbara** State **CA** Zip Code **93101**

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

Name of Employer **Bryant & Sons Jeweler** Occupation **Jeweler**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 28 / 2014

Transaction ID : 40228.C635

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Farnum Cole

Mailing Address **PO Box 1001**

City **Los Olivos** State **CA** Zip Code **93441**

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

Name of Employer **.Information Requested** Occupation **.Information Requested**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : 40314.C647

Amount of Each Receipt this Period
1000.00

Receipt

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

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

1500.00

**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 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Jamie Constance

Mailing Address 439 Meadowsbrook Drive

City Santa Barbara State CA Zip Code 93108

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

Name of Employer .Information Requested Occupation .Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40410.C654

Amount of Each Receipt this Period
 Receipt 500.00

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

Mailing Address 3330 Calle Rosales

City Santa Barbara State CA Zip Code 93105

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

Name of Employer .Information Requested Occupation .Information Requested

Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 08 / 2014

Transaction ID : 40214.C618

Amount of Each Receipt this Period
 Receipt 2500.00

C. Full Name (Last, First, Middle Initial)
Blair Edwards

Mailing Address 2317 Anacapa Street

City Santa Barbara State CA Zip Code 93105

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

Name of Employer .Information Requested Occupation .Information Requested

Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 08 / 2014

Transaction ID : 40214.C611

Amount of Each Receipt this Period
 Receipt 400.00

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

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

3400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 43
	<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)
Francisco For Congress

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

Mailing Address 1415 East Mountain Drive

City Santa Barbara	State CA	Zip Code 93108
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FEC ID number of contributing federal political committee. **C**

Name of Employer The Eyeglass Factory	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
 03 / 13 / 2014

Transaction ID : 40314.C642

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 232 Calle Las Caleras

City Santa Barbara	State CA	Zip Code 93109
-----------------------	-------------	-------------------

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

Name of Employer Fell Marking Abkin LLP	Occupation Attorney
--------------------------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 12 / 2014

Transaction ID : 40214.C626

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Randall Fox

Mailing Address 116 East Sola Street

City Santa Barbara	State CA	Zip Code 93101
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FEC ID number of contributing federal political committee. **C**

Name of Employer Reetz Fox & Bartlett	Occupation Attorney
------------------------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 31 / 2014

Transaction ID : 40131.C575

Amount of Each Receipt this Period
1000.00

Receipt

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 10 OF 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Dr. Mel Goldsmith

Mailing Address 1603 Alisa Lane

City Santa Barbara State CA Zip Code 93110

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

Name of Employer Retired 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
 02 / 08 / 2014

Transaction ID : 40214.C623

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Mrs. Mel Goldsmith

Mailing Address 1603 Alisa Lane

City Santa Barbara State CA Zip Code 93110

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

Name of Employer Retired 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
 02 / 08 / 2014

Transaction ID : 40214.C624

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 820 Picacho Lane

City Santa Barbara State CA Zip Code 93108

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : 40314.C649

Amount of Each Receipt this Period
2500.00

Receipt

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

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

3500.00

**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 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Marion Haws

Mailing Address 2410 Anacapa Street

City Santa Barbara State CA Zip Code 93105

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

Name of Employer .Information Requested Occupation .Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 31 / 2014

Transaction ID : 40131.C580

Amount of Each Receipt this Period
 Receipt 1000.00

B. Full Name (Last, First, Middle Initial)
Jed Hendrickson

Mailing Address 141 La Vista Grande

City Santa Barbara State CA Zip Code 93103

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

Name of Employer .Information Requested Occupation .Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : 40314.C646

Amount of Each Receipt this Period
 Receipt 500.00

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

Mailing Address 2501 Santa Barbara Avenue

City Los Olivos State CA Zip Code 93441

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

Name of Employer Self Employed Occupation Veterinarian

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 08 / 2014

Transaction ID : 40214.C598

Amount of Each Receipt this Period
 Receipt 3000.00

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

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

4500.00

**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 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Douglas Herthel

Mailing Address 2501 Santa Barbara Avenue

City Los Olivos State CA Zip Code 93441

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

Name of Employer Self Employed Occupation Veterinarian

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt **02 / 08 / 2014**

Transaction ID : 40214.C599

Amount of Each Receipt this Period **-400.00**

Reattribution Memo

[MEMO ITEM]
Reattribution To Spouse

B. Full Name (Last, First, Middle Initial)
Susan Herthel

Mailing Address 2501 Santa Barbara Avenue

City Los Olivos State CA Zip Code 93441

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

Name of Employer Self Employed Occupation Veterinarian

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **02 / 08 / 2014**

Transaction ID : 40214.C600

Amount of Each Receipt this Period **400.00**

Reattribution Memo

[MEMO ITEM]
Reattribution From Spouse

C. Full Name (Last, First, Middle Initial)
George Holbrook Jr.

Mailing Address 161 Rametto Road

City Santa Barbara State CA Zip Code 93108

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

Name of Employer Bradley Resource Company Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **01 / 31 / 2014**

Transaction ID : 40131.C586

Amount of Each Receipt this Period **1000.00**

Receipt

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Preston Hotchkis

Mailing Address 125 East Victoria Street #L

City Santa Barbara	State CA	Zip Code 93101
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	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
 01 / 31 / 2014

Transaction ID : 40131.C585

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 4319 Oakwood Avenue

City La Canada Flintrid	State CA	Zip Code 91011
----------------------------	-------------	-------------------

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

Name of Employer Capital Research & Mgmt	Occupation Financial Advisor
---------------------------------------------	---------------------------------

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 Y
 02 / 08 / 2014

Transaction ID : 40214.C614

Amount of Each Receipt this Period
5200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Gregory Johnson

Mailing Address 4319 Oakwood Avenue

City La Canada Flintrid	State CA	Zip Code 91011
----------------------------	-------------	-------------------

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

Name of Employer Capital Research & Mgmt	Occupation Financial Advisor
---------------------------------------------	---------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2014

Transaction ID : 40214.C615

Amount of Each Receipt this Period
-2600.00

Reattribution Memo
[MEMO ITEM]
 Reattribution To Spouse

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

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

5700.00

**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 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Jennifer Walston Johnson

Mailing Address 4319 Oakwood Avenue

City La Canada Flintrid State CA Zip Code 91011

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

Name of Employer Self Employed Occupation Volunteer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 08 / 2014

Transaction ID : 40214.C616

Amount of Each Receipt this Period
2600.00

Reattribution Memo
[MEMO ITEM]
Reattribution From Spouse

B. Full Name (Last, First, Middle Initial)
Sally Jordan

Mailing Address 1482 East Valley Road #252

City Santa Barbara State CA Zip Code 93108

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

Name of Employer Retired 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
 01 / 31 / 2014

Transaction ID : 40131.C587

Amount of Each Receipt this Period
2000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Irma Jurkowitz

Mailing Address 880 Park Lane

City Santa Barbara State CA Zip Code 93108

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 08 / 2014

Transaction ID : 40214.C601

Amount of Each Receipt this Period
2600.00

Receipt

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

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

4600.00

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

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

FOR LINE NUMBER: PAGE 15 OF 43
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Morris Jurkowitz

Mailing Address 1933 Cliff Drive #2

City Santa Barbara State CA Zip Code 93109

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

Name of Employer Self Employed Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 08 / 2014

Transaction ID : 40214.C594

Amount of Each Receipt this Period
 Receipt 2600.00

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

Mailing Address 2323 Anacapa Street

City Santa Barbara State CA Zip Code 93105

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

Name of Employer .Information Requested Occupation .Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : 40314.C641

Amount of Each Receipt this Period
 Receipt 500.00

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

Mailing Address 1290 Kenwood Road

City Santa Barbara State CA Zip Code 93109

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

Name of Employer Pearl Bay Corporation Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40321.C653

Amount of Each Receipt this Period
 Receipt 250.00

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

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

3350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Dwight Lowell

Mailing Address 901 Cima Del Mundo Road

City Santa Barbara State CA Zip Code 93108

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

Name of Employer Retired 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 Y
 02 / 28 / 2014

Transaction ID : 40228.C632

Amount of Each Receipt this Period
 Receipt 5200.00

B. Full Name (Last, First, Middle Initial)
Dwight Lowell

Mailing Address 901 Cima Del Mundo Road

City Santa Barbara State CA Zip Code 93108

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

Name of Employer Retired 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 Y
 02 / 28 / 2014

Transaction ID : 40228.C633

Amount of Each Receipt this Period
 Reattribution Memo -2600.00

[MEMO ITEM]
Reattribution To Spouse

C. Full Name (Last, First, Middle Initial)
Kimberly Lowell

Mailing Address 901 Cima Del Mundo Road

City Santa Barbara State CA Zip Code 93108

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

Name of Employer Retired 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 Y
 02 / 28 / 2014

Transaction ID : 40228.C634

Amount of Each Receipt this Period
 Reattribution Memo 2600.00

[MEMO ITEM]
Reattribution From Spouse

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

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

5200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Alix Mattingly

Mailing Address 929 Camino Viejo

City Santa Barbara State CA Zip Code 93108

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
 02 / 08 / 2014

Transaction ID : 40214.C613

Amount of Each Receipt this Period
 Receipt 500.00

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

Mailing Address 929 Camino Viejo

City Santa Barbara State CA Zip Code 93108

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

Name of Employer Self Employed Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 08 / 2014

Transaction ID : 40214.C619

Amount of Each Receipt this Period
 Receipt 500.00

C. Full Name (Last, First, Middle Initial)
Janet McCann

Mailing Address 947 Arbolado Road

City Santa Barbara State CA Zip Code 93103

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

Name of Employer Hollywood Allied Moving Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : 40314.C645

Amount of Each Receipt this Period
 Receipt 500.00

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

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

1500.00

**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 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
J. W. McIntyre

Mailing Address 560 Toro Canyon Road

City Santa Barbara State CA Zip Code 93108

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

Name of Employer .Information Requested Occupation .Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 31 / 2014

Transaction ID : 40131.C577

Amount of Each Receipt this Period
 Receipt 500.00

B. Full Name (Last, First, Middle Initial)
Mari Mender

Mailing Address 3326 Calle Noguera

City Santa Barbara State CA Zip Code 93105

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

Name of Employer Cottage Health Systems Occupation Registered Nurse

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 27 / 2014

Transaction ID : 40228.C630

Amount of Each Receipt this Period
 Receipt 250.00

C. Full Name (Last, First, Middle Initial)
Frances Morehart

Mailing Address 3393 Padaro Lane

City Carpinteria State CA Zip Code 93013

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 08 / 2014

Transaction ID : 40214.C604

Amount of Each Receipt this Period
 Receipt 2600.00

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

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

3350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Robert Madison Murphy II

Mailing Address 200 North Jefferson #400

City State Zip Code
El Dorado AR 71730

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

Name of Employer .Information Requested
Occupation .Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 08 / 2014

Transaction ID : 40214.C617

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Susan Neuman

Mailing Address 121 Bath Street #D-3

City State Zip Code
Santa Barbara CA 93101

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

Name of Employer .Information Requested
Occupation .Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : 40314.C648

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Judith Dodge Orias

Mailing Address 3788 Torino Drive

City State Zip Code
Santa Barbara CA 93105

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

Name of Employer .Information Requested
Occupation .Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 31 / 2014

Transaction ID : 40131.C592

Amount of Each Receipt this Period
250.00

Receipt

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 20 OF 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Alan Porter

Mailing Address **PO Box 5260**

City **Santa Barbara** State **CA** Zip Code **93150**

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

Name of Employer **Alan R Porter Investments** Occupation **Investments**

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
03 / 31 / 2014

Transaction ID : 40410.C655

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Leon Presser

Mailing Address **4220 Cresta Avenue**

City **Santa Barbara** State **CA** Zip Code **93110**

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

Name of Employer **Self Employed** Occupation **Physician**

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
03 / 31 / 2014

Transaction ID : 40410.C658

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address **1550 La Vista Road**

City **Santa Barbara** State **CA** Zip Code **93110**

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

Name of Employer **Self Employed** Occupation **Service Station Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 08 / 2014

Transaction ID : 40214.C620

Amount of Each Receipt this Period
2600.00

Receipt

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

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

3600.00

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

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

FOR LINE NUMBER: PAGE 21 OF 43
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Barbara Sanborn

Mailing Address 1233 Mission Ridge Road

City Santa Barbara State CA Zip Code 93103

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

Name of Employer .Information Requested Occupation .Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2014

Transaction ID : 40131.C582

Amount of Each Receipt this Period
 _____ 2500.00

Receipt

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

Mailing Address 1233 Mission Ridge Road

City Santa Barbara State CA Zip Code 93103

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

Name of Employer .Information Requested Occupation .Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2014

Transaction ID : 40131.C583

Amount of Each Receipt this Period
 _____ 2500.00

Receipt

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

Mailing Address 680 Cowles Road

City Santa Barbara State CA Zip Code 93108

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

Name of Employer .Information Requested Occupation .Information Requested

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
 01 / 31 / 2014

Transaction ID : 40131.C588

Amount of Each Receipt this Period
 _____ 500.00

Receipt

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

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

_____ 5500.00

**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 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Gerry Shepherd

Mailing Address **PO Box 30**
1400 Highway 154

City **Santa Ynez** State **CA** Zip Code **93460**

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

Name of Employer **Retired** 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
02 / 14 / 2014

Transaction ID : 40214.C627

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Robertson Short Jr.

Mailing Address **300 Hot Springs Road #20**

City **Santa Barbara** State **CA** Zip Code **93108**

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

Name of Employer **Retired** 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
01 / 31 / 2014

Transaction ID : 40131.C579

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address **3820 State Street**

City **Santa Barbara** State **CA** Zip Code **93105**

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

Name of Employer **.Information Requested** Occupation **.Information Requested**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
01 / 31 / 2014

Transaction ID : 40131.C590

Amount of Each Receipt this Period
2500.00

Receipt

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

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

3750.00

**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 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Shannon Sorensen

Mailing Address 3820 State Street

City Santa Barbara State CA Zip Code 93105

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

Name of Employer .Information Requested Occupation .Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2014

Transaction ID : 40131.C591

Amount of Each Receipt this Period
 Receipt 2500.00

B. Full Name (Last, First, Middle Initial)
L. David Tisdale

Mailing Address 252 Hot Springs Road

City Santa Barbara State CA Zip Code 93108

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

Name of Employer Starbucks Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40410.C662

Amount of Each Receipt this Period
 Receipt 2600.00

C. Full Name (Last, First, Middle Initial)
Donn Tognazzini

Mailing Address PO Box 599

City Los Olivos State CA Zip Code 93441

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

Name of Employer Retired 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 Y
 03 / 13 / 2014

Transaction ID : 40314.C650

Amount of Each Receipt this Period
 Receipt 500.00

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

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

5600.00

**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 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Douglas Unger

Mailing Address 84 Innisbrook Avenue

City Las Vegas State NV Zip Code 89113

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

Name of Employer New West Mattress Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : 40228.C639

Amount of Each Receipt this Period
 Receipt 500.00

B. Full Name (Last, First, Middle Initial)
Susheela Vaidya

Mailing Address 3480 Granada Avenue #150

City Santa Clara State CA Zip Code 95051

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

Name of Employer Brocade Communications Inc. Occupation Software Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 19 / 2014

Transaction ID : 40321.C651

Amount of Each Receipt this Period
 Receipt 1050.00

C. Full Name (Last, First, Middle Initial)
Marilyn Vandever

Mailing Address 970 Brooktree Road

City Santa Barbara State CA Zip Code 93108

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : 40228.C637

Amount of Each Receipt this Period
 Receipt 2000.00

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

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

3550.00

**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 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Barbara VanWinkle

Mailing Address 1906 Hickory Trace Drive

City State Zip Code
Fleming Island FL 32003

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

Name of Employer .Information Requested
Occupation .Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 40410.C661

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address PO Box 1137

City State Zip Code
Summerland CA 93067

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

Name of Employer .Information Requested
Occupation .Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 08 / 2014

Transaction ID : 40214.C610

Amount of Each Receipt this Period
2600.00

Receipt

C. Full Name (Last, First, Middle Initial)
Leslie Watson

Mailing Address 5871 Hickory Hollow Lane

City State Zip Code
Doylestown PA 18902

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

Name of Employer .Information Requested
Self Employed Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2014

Transaction ID : 40321.C652

Amount of Each Receipt this Period
1000.00

Receipt

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

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

4100.00

**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 43
	<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)
Francisco For Congress

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

Mailing Address 5871 Hickory Hollow Lane

City State Zip Code
Doylestown PA 18902

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

Name of Employer Occupation
IWPC Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 08 / 2014

Transaction ID : 40214.C625

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 822 Jimeno Road

City State Zip Code
Santa Barbara CA 93103

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

Name of Employer Occupation
Retired 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
01 / 31 / 2014

Transaction ID : 40131.C593

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Sharon Westby

Mailing Address 822 Jimeno Road

City State Zip Code
Santa Barbara CA 93103

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

Name of Employer Occupation
Retired 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
01 / 31 / 2014

Transaction ID : 40131.C576

Amount of Each Receipt this Period
1000.00

Receipt

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

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

3000.00

**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 43
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Sharon Westby

Mailing Address 822 Jimeno Road

City Santa Barbara State CA Zip Code 93103

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

Name of Employer Retired 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
01 / 31 / 2014

Transaction ID : 40131.C584

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Candace Whilt

Mailing Address 233 East Islay Street

City Santa Barbara State CA Zip Code 93101

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

Name of Employer .Information Requested Occupation .Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 28 / 2014

Transaction ID : 40228.C636

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Roger Willmon

Mailing Address 601 San Ysidro Road

City Santa Barbara State CA Zip Code 93108

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

Name of Employer Pacific Southwest Realty Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 31 / 2014

Transaction ID : 40131.C589

Amount of Each Receipt this Period
1000.00

Receipt

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

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

3000.00

79450.00

**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 28 OF 43			
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial) A. Bill Bailey		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 424 Olive Street		Amount of Each Disbursement this Period 325.00 Transaction ID : 40410.E861
City Santa Barbara	State CA	
Zip Code 93101-	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. California Republican Party		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 1903 West Magnolia Boulevard		Amount of Each Disbursement this Period 290.00 Transaction ID : 40410.E877
City Burbank	State CA	
Zip Code 91506-	Purpose of Disbursement Mtg Registration Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	MTG REGISTRATION FEES

Full Name (Last, First, Middle Initial) c. California Secretary Of State		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 1500 11th Street		Amount of Each Disbursement this Period 1740.00 Transaction ID : 40410.E858
City Sacramento	State CA	
Zip Code 95814-	Purpose of Disbursement Filing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	FILING FEES

SUBTOTAL of Disbursements This Page (optional).....	2355.00
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 29 OF 43			
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. Copy Right		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>13</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		13		2014
M M	/	D D	/	Y Y Y Y									
03		13		2014									
Mailing Address 908 East Colorado Boulevard		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Pasadena</td> <td>CA</td> <td>91106-</td> </tr> </table>		City	State	Zip Code	Pasadena	CA	91106-	<table border="1"> <tr> <td>369.10</td> </tr> </table>		369.10			
City	State	Zip Code											
Pasadena	CA	91106-											
369.10													
Purpose of Disbursement Printing		Transaction ID : 40410.E866											
Candidate Name		Category/Type											
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For:</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td>State:</td> <td>District:</td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) </td> </tr> </table>		Office Sought:	House	Disbursement For:		Senate		President	State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PRINTING	
Office Sought:	House	Disbursement For:											
	Senate												
	President												
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. County Clerk		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>10</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		10		2014
M M	/	D D	/	Y Y Y Y									
03		10		2014									
Mailing Address 1100 Anacapa Street		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Santa Barbara</td> <td>CA</td> <td>93101-</td> </tr> </table>		City	State	Zip Code	Santa Barbara	CA	93101-	<table border="1"> <tr> <td>2196.49</td> </tr> </table>		2196.49			
City	State	Zip Code											
Santa Barbara	CA	93101-											
2196.49													
Purpose of Disbursement Data/Voter Lists		Transaction ID : 40410.E875											
Candidate Name		Category/Type											
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For:</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td>State:</td> <td>District:</td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) </td> </tr> </table>		Office Sought:	House	Disbursement For:		Senate		President	State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATA/VOTER LISTS	
Office Sought:	House	Disbursement For:											
	Senate												
	President												
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. Element		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>20</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		20		2014
M M	/	D D	/	Y Y Y Y									
02		20		2014									
Mailing Address 10555 Discovery Drive		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Las Vegas</td> <td>NV</td> <td>89135-</td> </tr> </table>		City	State	Zip Code	Las Vegas	NV	89135-	<table border="1"> <tr> <td>333.76</td> </tr> </table>		333.76			
City	State	Zip Code											
Las Vegas	NV	89135-											
333.76													
Purpose of Disbursement Travel		Transaction ID : 40410.E855											
Candidate Name		Category/Type											
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For:</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td>State:</td> <td>District:</td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) </td> </tr> </table>		Office Sought:	House	Disbursement For:		Senate		President	State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	TRAVEL	
Office Sought:	House	Disbursement For:											
	Senate												
	President												
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

SUBTOTAL of Disbursements This Page (optional).....	2899.35
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 30 OF 43			
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial) A. Four Points Sheraton			Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 1050 Schooner Drive			Amount of Each Disbursement this Period 706.49 Transaction ID : 40410.E854
City Ventura	State CA	Zip Code 93001-	
Purpose of Disbursement Travel	Candidate Name		Category/ Type TRAVEL
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) B. Gridiron Communications			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 100 North Brand Boulevard #304			Amount of Each Disbursement this Period 4850.00 Transaction ID : 40410.E874
City Glendale	State CA	Zip Code 91203-	
Purpose of Disbursement Printing	Candidate Name		Category/ Type PRINTING
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. Hyatt Hotels San Francisco			Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 345 Stockton Street			Amount of Each Disbursement this Period 380.56 Transaction ID : 40410.E882
City San Francisco	State CA	Zip Code 94108-	
Purpose of Disbursement Travel	Candidate Name		Category/ Type TRAVEL
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).....	5937.05
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 31 OF 43			
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial) A. Rachel Kim			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014		
Mailing Address 227 Mesa Verde Dr			Amount of Each Disbursement this Period 48.00		
City Santa Barbara	State CA	Zip Code 93110-	Transaction ID : 40410.E850		
Purpose of Disbursement Consulting Grassroots		Category/ Type			
Candidate Name		CONSULTING GRASSROOTS			
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) B. Rachel Kim			Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014		
Mailing Address 227 Mesa Verde Dr			Amount of Each Disbursement this Period 1425.00		
City Santa Barbara	State CA	Zip Code 93110-	Transaction ID : 40410.E868		
Purpose of Disbursement Consulting Grassroots		Category/ Type			
Candidate Name		CONSULTING GRASSROOTS			
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. Ashley Latka			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014		
Mailing Address 652 Lynwood Street			Amount of Each Disbursement this Period 812.50		
City Thousand Oaks	State CA	Zip Code 91360-	Transaction ID : 40410.E862		
Purpose of Disbursement Consulting Grassroots		Category/ Type			
Candidate Name		CONSULTING GRASSROOTS			
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).....	2285.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 43			
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial) A. Ashley Latka		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 652 Lynwood Street		Amount of Each Disbursement this Period 812.50
City Thousand Oaks	State CA	
Zip Code 91360-	Purpose of Disbursement Consulting Grassroots	Transaction ID : 40410.E870
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CONSULTING GRASSROOTS
State: District:		

Full Name (Last, First, Middle Initial) B. Lukens Company		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 837 Traction Avenue, Suite 404		Amount of Each Disbursement this Period 350.00
City Los Angeles	State CA	
Zip Code 90013-	Purpose of Disbursement Telephone Svcs	Transaction ID : 40410.E871
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	TELEPHONE SVCS
State: District:		

Full Name (Last, First, Middle Initial) C. Northstar Campaign Systems		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 11421 Davenport Street		Amount of Each Disbursement this Period 2750.07
City Omaha	State NE	
Zip Code 68154-	Purpose of Disbursement Telephone Svcs	Transaction ID : 40410.E869
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	TELEPHONE SVCS
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3912.57
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 33 OF 43
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 126.50
City San Francisco State CA Zip Code 94105-	Purpose of Disbursement Merchant Processing Fees	
Candidate Name		Transaction ID : 40214.E837
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)	MERCHANT PROCESSING FEES
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 149.50
City San Francisco State CA Zip Code 94105-	Purpose of Disbursement Merchant Processing Fees	
Candidate Name		Transaction ID : 40214.E836
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)	MERCHANT PROCESSING FEES
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco State CA Zip Code 94105-	Purpose of Disbursement Merchant Processing Fees	
Candidate Name		Transaction ID : 40214.E838
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)	MERCHANT PROCESSING FEES
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	290.38
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 34 OF 43			
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial) A. Piryx			Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	Zip Code 94105-	
Purpose of Disbursement Merchant Processing Fees		Category/ Type	Transaction ID : 40214.E839
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)		MERCHANT PROCESSING FEES
State: District:			

Full Name (Last, First, Middle Initial) B. Piryx			Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	Zip Code 94105-	
Purpose of Disbursement Merchant Processing Fees		Category/ Type	Transaction ID : 40221.E840
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)		MERCHANT PROCESSING FEES
State: District:			

Full Name (Last, First, Middle Initial) C. Piryx			Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	Zip Code 94105-	
Purpose of Disbursement Merchant Processing Fees		Category/ Type	Transaction ID : 40228.E841
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)		MERCHANT PROCESSING FEES
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	31.64
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 35 OF 43			
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial) A. Piryx			Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014		
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 60.38		
City San Francisco	State CA	Zip Code 94105-	Transaction ID : 40321.E842		
Purpose of Disbursement Merchant Processing Fees		Category/ Type			
Candidate Name		MERCHANT PROCESSING FEES			
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) B. Piryx			Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014		
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 57.50		
City San Francisco	State CA	Zip Code 94105-	Transaction ID : 40321.E843		
Purpose of Disbursement Merchant Processing Fees		Category/ Type			
Candidate Name		MERCHANT PROCESSING FEES			
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. Piryx			Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014		
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 14.38		
City San Francisco	State CA	Zip Code 94105-	Transaction ID : 40321.E844		
Purpose of Disbursement Merchant Processing Fees		Category/ Type			
Candidate Name		MERCHANT PROCESSING FEES			
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).....	132.26
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 36 OF 43			
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 11.50
City San Francisco	State CA	
Zip Code 94105-	Purpose of Disbursement Merchant Processing Fees	Transaction ID : 40410.E847
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	MERCHANT PROCESSING FEES
State: District:		

Full Name (Last, First, Middle Initial) B. Santa Barbara County Registrar		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 4440-A Calle Real		Amount of Each Disbursement this Period 8730.00
City Santa Barbara	State CA	
Zip Code 93110-	Purpose of Disbursement Filing Fees	Transaction ID : 40410.E863
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FILING FEES
State: District:		

Full Name (Last, First, Middle Initial) c. Strategy Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 234 East Colorado Boulevard #210		Amount of Each Disbursement this Period 7500.00
City Pasadena	State CA	
Zip Code 91101-	Purpose of Disbursement Videography Svcs	Transaction ID : 40410.E873
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	VIDEOGRAPHY SVCS
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	16241.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 43			
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 907.00
City Amf Ohare	State IL	
Zip Code 60666-	Purpose of Disbursement Travel	Transaction ID : 40410.E880
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	TRAVEL
State: District:		

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 50.00
City Amf Ohare	State IL	
Zip Code 60666-	Purpose of Disbursement Travel	Transaction ID : 40410.E886
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	TRAVEL
State: District:		

Full Name (Last, First, Middle Initial) C. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 95.00
City Amf Ohare	State IL	
Zip Code 60666-	Purpose of Disbursement Travel	Transaction ID : 40410.E884
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	TRAVEL
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1052.00
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 38 OF 43		
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 836 Anacapa Street		Amount of Each Disbursement this Period 203.00 Transaction ID : 40410.E859
City Santa Barbara State CA Zip Code 93102-	Purpose of Disbursement Postage	
Candidate Name	Category/Type	POSTAGE
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) B. Venture County Registrar of Voters		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 800 South Victoria Avenue		Amount of Each Disbursement this Period 525.00 Transaction ID : 40410.E864
City Ventura State CA Zip Code 93009-	Purpose of Disbursement Filing Fees	
Candidate Name	Category/Type	FILING FEES
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. Valerie Watson		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 2407 Anacapa Street		Amount of Each Disbursement this Period 170.00 Transaction ID : 40414.E895
City Santa Barbara State CA Zip Code 93105-	Purpose of Disbursement Meeting Registration Fees	
Candidate Name	Category/Type	MEETING REGISTRATION FEES
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).....	898.00
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 39 OF 43		
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial) A. Valerie Watson		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 2407 Anacapa Street		Amount of Each Disbursement this Period 853.04 Transaction ID : 40414.E894
City Santa Barbara State CA Zip Code 93105-	Purpose of Disbursement See Below/Travel	
Candidate Name	Category/Type	SEE BELOW/TRAVEL
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) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 689.00 Transaction ID : 40414.E903
City Amf Ohare State IL Zip Code 60666-	Purpose of Disbursement Travel	
Candidate Name	Category/Type	[MEMO ITEM] MEMO: TRAVEL
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. Valerie Watson		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 2407 Anacapa Street		Amount of Each Disbursement this Period 480.93 Transaction ID : 40414.E893
City Santa Barbara State CA Zip Code 93105-	Purpose of Disbursement See Below/Shipping	
Candidate Name	Category/Type	SEE BELOW/SHIPPING
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).....	1333.97
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 40 OF 43			
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 836 Anacapa Street		Amount of Each Disbursement this Period 184.00
City Santa Barbara	State CA	
Zip Code 93102-	Purpose of Disbursement Shipping	Transaction ID : 40414.E901
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: SHIPPING
State: District:		

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 1030 State Street		Amount of Each Disbursement this Period 296.93
City Santa Barbara	State CA	
Zip Code 93101-	Purpose of Disbursement Shipping	Transaction ID : 40414.E902
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: SHIPPING
State: District:		

Full Name (Last, First, Middle Initial) c. Valerie Watson		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 2407 Anacapa Street		Amount of Each Disbursement this Period 1024.87
City Santa Barbara	State CA	
Zip Code 93105-	Purpose of Disbursement See Below/Office Supplies	Transaction ID : 40410.E872
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SEE BELOW/OFFICE SUPPLIES
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1024.87
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 41 OF 43		
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial) A. Pacific Political		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address PO Box 2754		Amount of Each Disbursement this Period 880.20
City Vista	State CA Zip Code 92081-	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : 40414.E897
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: OFFICE SUPPLIES

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	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
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	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	38394.09

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)

Francisco For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Red Rock Strategies

Nature of Debt (Purpose):
Consulting Management

Mailing Address 9500 East Flamingo #203

City State Zip Code
Las Vegas NV 89147-

Outstanding Balance Beginning This Period
4000.00

Transaction ID : LS40415.E909

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
17000.00 0.00 21000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Red Rock Strategies

Nature of Debt (Purpose):
Travel

Mailing Address 9500 East Flamingo #203

City State Zip Code
Las Vegas NV 89147-

Outstanding Balance Beginning This Period
0.00

Transaction ID : LS40415.E910

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
234.56 0.00 234.56

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
In Compliance Inc.

Nature of Debt (Purpose):
Consulting Treasury

Mailing Address PO Box 751271

City State Zip Code
Las Vegas NV 89136-

Outstanding Balance Beginning This Period
0.00

Transaction ID : LS40415.E911

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
8000.00 0.00 8000.00

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 2) **TOTALS** This Period (last page this line number only) ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

29234.56
0.00
0.00

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)

Francisco For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
In Compliance Inc.

Nature of Debt (Purpose):
Printing

Mailing Address PO Box 751271

City State Zip Code
Las Vegas NV 89136-

Outstanding Balance Beginning This Period

0.00

Transaction ID : LS40415.E912

Amount Incurred This Period

2.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
In Compliance Inc.

Nature of Debt (Purpose):
Shipping

Mailing Address PO Box 751271

City State Zip Code
Las Vegas NV 89136-

Outstanding Balance Beginning This Period

0.00

Transaction ID : LS40415.E913

Amount Incurred This Period

45.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

45.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
In Compliance Inc.

Nature of Debt (Purpose):
Software & Support

Mailing Address PO Box 751271

City State Zip Code
Las Vegas NV 89136-

Outstanding Balance Beginning This Period

0.00

Transaction ID : LS40415.E914

Amount Incurred This Period

1950.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1950.00

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 2) **TOTALS** This Period (last page this line number only) ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

1997.75
31232.31
0.00
31232.31