

# 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  
**Friends of Lois Capps**

ADDRESS (number and street) P.O. Box 23940  
 Check if different than previously reported. (ACC) Santa Barbara CA 93121

2. **FEC IDENTIFICATION NUMBER** ▼ C C00331389 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A) CA 24

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 M M / D D / Y Y Y Y in the State of  

(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y 05 / 15 / 2014 through M M / D D / Y Y Y Y 06 / 30 / 2014

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 Andrew Siegel

Signature of Treasurer Andrew Siegel *[Electronically Filed]* Date M M / D D / Y Y Y Y 07 / 15 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Friends of Lois Capps**

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))....	213441.87	1629603.60
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	5381.87
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	213441.87	1624221.73
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	140093.88	1096482.52
(b) Total Offsets to Operating Expenditures (from Line 14).....	5865.34	28545.71
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	134228.54	1067936.81
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1094445.49	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	117925.00	
10. Debts and Obligations Owed <b>BY</b> 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

**Friends of Lois Capps**

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).....	65301.00	675794.34
(ii) Unitemized.....	18382.47	169984.09
(iii) TOTAL of contributions from individuals ▶	83683.47	845753.43
(b) Political Party Committees.....	4508.40	5797.84
(c) Other Political Committees (such as PACs).....	125250.00	778052.33
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	213441.87	1629603.60
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.) .....	5865.34	28545.71
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	367.28	48707.92
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	219674.49	1706857.23

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	140093.88	1096482.52
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	2687.37
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2694.50
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	5381.87
21. OTHER DISBURSEMENTS .....	250.00	10879.85
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	140343.88	1112744.24

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1015114.88
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	219674.49
25. SUBTOTAL (add Line 23 and Line 24).....	1234789.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	140343.88
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1094445.49

**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 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Abrahams**

Mailing Address 335 San Miguel Ave

City San Luis Obispo State CA Zip Code 93405-2135

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

Name of Employer Self-employed Occupation Pyschiatrist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**205.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 29 / 2014**

**Transaction ID : C9398052**

Amount of Each Receipt this Period  
**30.00**

**B.** Full Name (Last, First, Middle Initial)  
**Joseph Abrahams**

Mailing Address 335 San Miguel Ave

City San Luis Obispo State CA Zip Code 93405-2135

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

Name of Employer Self-employed Occupation Pyschiatrist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**205.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 11 / 2014**

**Transaction ID : C9426347**

Amount of Each Receipt this Period  
**10.00**

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

Mailing Address 2250 King Ct  
Unit 7

City San Luis Obispo State CA Zip Code 93401-5501

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

Name of Employer N/A Occupation Retired

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 Y  
**06 / 30 / 2014**

**Transaction ID : C10095947**

Amount of Each Receipt this Period  
**25.00**

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

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

**65.00**

**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 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Clifford Anderson**

Mailing Address 1408 La Sierra Dr

City Sacramento State CA Zip Code 95864-3035

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

Name of Employer CSU, Sacramento Occupation Teacher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 15 / 2014**

**Transaction ID : C10100390**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Clifford Anderson**

Mailing Address 1408 La Sierra Dr

City Sacramento State CA Zip Code 95864-3035

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

Name of Employer CSU, Sacramento Occupation Teacher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 23 / 2014**

**Transaction ID : C9857110**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Richard P. Appelbaum**

Mailing Address 1525 Las Canoas Rd

City Santa Barbara State CA Zip Code 93105-2342

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

Name of Employer UCSB Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **-650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 18 / 2014**

**Transaction ID : C9853546**

Amount of Each Receipt this Period  
**150.00**

**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 7 OF 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Gloria Arenson**

Mailing Address 1429 Las Positas Pl

City Santa Barbara State CA Zip Code 93105-4525

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

Name of Employer Self Occupation Marriage Family Therapist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 27 / 2014**

**Transaction ID : C9360486**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Gloria Arenson**

Mailing Address 1429 Las Positas Pl

City Santa Barbara State CA Zip Code 93105-4525

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

Name of Employer Self Occupation Marriage Family Therapist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : C9855146**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**CHARLES ARNOLD**

Mailing Address 122 W Cypress Ave

City Lompoc State CA Zip Code 93436-6713

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

Name of Employer UCC Occupation Pastor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **243.34**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : C9854334**

Amount of Each Receipt this Period  
**25.00**

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

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

**75.00**

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

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

FOR LINE NUMBER: PAGE 8 OF 143  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES ARNOLD**

Mailing Address 122 W Cypress Ave

City Lompoc State CA Zip Code 93436-6713

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

Name of Employer UCC Occupation Pastor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**243.34**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : C9855839**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Concettina Arnold**

Mailing Address 777 N Ocean Ave

City Cayucos State CA Zip Code 93430-1026

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  
**1300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 15 / 2014**

**Transaction ID : C9361529**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Tanya Atwater**

Mailing Address 747 Knapp Dr

City Santa Barbara State CA Zip Code 93108-1908

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  
**05 / 20 / 2014**

**Transaction ID : C9358287**

Amount of Each Receipt this Period  
**1000.00**

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

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

**2025.00**



**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 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Virginia Baker**

Mailing Address 1716 Bath St  
Apt 3

City Santa Barbara State CA Zip Code 93101-2965

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  
1100.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2014

**Transaction ID : C9361560**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Else Bard**

Mailing Address 721 Mas Amigos  
# B

City Santa Barbara State CA Zip Code 93105-5468

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  
1600.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 28 / 2014

**Transaction ID : C9856079**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Kathy Beaton**

Mailing Address P.O. Box 4401

City San Luis Obispo State CA Zip Code 93403

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

Name of Employer Self Occupation Artist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 16 / 2014

**Transaction ID : C9356884**

Amount of Each Receipt this Period  
1000.00

**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 10 OF 143
	<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)  
**Friends of Lois Capps**

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

Mailing Address 4538 Oak Glen Dr  
Unit G

City Santa Barbara State CA Zip Code 93110-1360

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

Name of Employer none Occupation artist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**210.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 31 / 2014**

**Transaction ID : C9362498**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Linda Benet**

Mailing Address 4538 Oak Glen Dr  
Unit G

City Santa Barbara State CA Zip Code 93110-1360

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

Name of Employer none Occupation artist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**210.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C9857472**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 433 Alcala Lane

City Santa Barbara State CA Zip Code 93108

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

Name of Employer Self Occupation Writer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 16 / 2014**

**Transaction ID : C9853523**

Amount of Each Receipt this Period  
**100.00**

**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 11 OF 143
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Linda Brown</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2014	
Mailing Address 2756 Macadamia Ln		<b>Transaction ID : C9361437</b>	
City Santa Barbara	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 93108-1658			
FEC ID number of contributing federal political committee. C			
Name of Employer Sotheby's	Occupation Realtor		
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>B. Robert Broz</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 02 / 2014	
Mailing Address 1887 Lake Club Dr		<b>Transaction ID : C9362826</b>	
City Gaylord	State MI	Amount of Each Receipt this Period 50.00	
Zip Code 49735-8929			
FEC ID number of contributing federal political committee. C			
Name of Employer Alpine PCS	Occupation executive		
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>C. Tom Budlong</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014	
Mailing Address 3216 Mandeville		<b>Transaction ID : C9361550</b>	
City Los Angeles	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 90049			
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 1101.56		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> 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 12 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Frank Burgess**

Mailing Address 100 Wisconsin Ave. #600

City Madison State WI Zip Code 53703

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

Name of Employer Madison Funds Occupation Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : C9398149**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Roger Capps**

Mailing Address 3009 SE Lambert St

City Portland State OR Zip Code 97202-8566

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  
 06 / 25 / 2014

**Transaction ID : C9854623**

Amount of Each Receipt this Period  
 25.00

**C.** Full Name (Last, First, Middle Initial)  
**Wendy Carsel**

Mailing Address 3285 Shearer Ave

City Cayucos State CA Zip Code 93430-1844

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

Name of Employer Self Occupation Marriage & Family Therapist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : C9360942**

Amount of Each Receipt this Period  
 500.00

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

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

1025.00

**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 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>Judi Cearnal</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 3878 Crescent Dr		<b>Transaction ID : C9853555</b>
City Santa Barbara	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Cearnal Andrulaitis LLP	Occupation Office Manager	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>James Clevenger</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 525 Bernardo Ave		<b>Transaction ID : C9853502</b>
City Morro Bay	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) <b>Bill Cline</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 690 Ardmore Dr		<b>Transaction ID : C9361410</b>
City Goleta	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	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	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> 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 14 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**James Conway**

Mailing Address 110 Chaney Ave

City Cayucos State CA Zip Code 93430-1806

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

Name of Employer Cal Poly Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C9856058**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Janene Cooper**

Mailing Address 3560 Studio Dr

City Cayucos State CA Zip Code 93430-1944

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  
 06 / 25 / 2014

**Transaction ID : C9857180**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Barry Coughlin**

Mailing Address 909 E Fir Ave

City Lompoc State CA Zip Code 93436-7919

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

Name of Employer retired Occupation physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 24 / 2014

**Transaction ID : C9360206**

Amount of Each Receipt this Period  
100.00

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

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

2800.00

**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 143
	<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)  
**Friends of Lois Capps**

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

Mailing Address 271 Penny Ln

City Santa Barbara State CA Zip Code 93108-2667

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

Name of Employer Self-employed Occupation investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : C9356873**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1437 Hillcrest Rd

City Santa Barbara State CA Zip Code 93103-1838

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

Name of Employer self Occupation homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C9857192**

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Jospehine De Luca**

Mailing Address 65 Black Fox Way

City Redwood City State CA Zip Code 94062

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  
 06 / 24 / 2014

**Transaction ID : C9857220**

Amount of Each Receipt this Period  
 1000.00

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**William L. Denneen**

Mailing Address 1040 Cielo Ln

City Nipomo State CA Zip Code 93444-9039

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 **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 20 / 2014**

**Transaction ID : C9857229**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 215 Boeker Ave

City Pismo Beach State CA Zip Code 93449-2013

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  
**05 / 17 / 2014**

**Transaction ID : C9361544**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Gerald DiPego**

Mailing Address 4001 Long Valley Rd

City Santa Ynez State CA Zip Code 93460-9721

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

Name of Employer Self Occupation Writer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 23 / 2014**

**Transaction ID : C9361415**

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 17 OF 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Gere DiZerega**

Mailing Address 4491 Greenbrier Pl

City San Luis Obispo State CA Zip Code 93401-8387

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

Name of Employer USBiotest Occupation President & CEO

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  
 06 / 24 / 2014

**Transaction ID : C9857236**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**David Doner**

Mailing Address 404 S San Marcos Rd

City Santa Barbara State CA Zip Code 93111-2726

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

Name of Employer retired Occupation retired md

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
425.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 15 / 2014

**Transaction ID : C9361048**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Tomaso Falzone**

Mailing Address 550 Barker Pass Rd

City Santa Barbara State CA Zip Code 93108-1725

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

Name of Employer sansum clinic Occupation psychologist

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  
 06 / 25 / 2014

**Transaction ID : C9854541**

Amount of Each Receipt this Period  
100.00

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

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

700.00

**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 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Adrienne Fields**

Mailing Address 3900B Watson PI NW  
Apt 1D

City Washington State DC Zip Code 20016-6705

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  
 05 / 24 / 2014

**Transaction ID : C9361411**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Jerry Fields**

Mailing Address 10508 Clearwood Ct

City Los Angeles State CA Zip Code 90077-2019

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  
 06 / 17 / 2014

**Transaction ID : C9853542**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Patricia S. Foley**

Mailing Address 515 Braemar Ranch Ln

City Santa Barbara State CA Zip Code 93109-1064

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

Name of Employer self Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
279.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : C9361421**

Amount of Each Receipt this Period  
90.00

**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 19 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Margaret Foster**

Mailing Address 456 Crocker Sperry Dr

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 **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 21 / 2014**

**Transaction ID : C9361423**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Frank Freitas**

Mailing Address 855 Live Oak Ridge Rd

City Nipomo State CA Zip Code 93444-7811

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

Name of Employer Slo County Occupation Treasurer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 24 / 2014**

**Transaction ID : C9857237**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Bette goldenring**

Mailing Address 974 Woodstock Lane

City Ventura State CA Zip Code 93001-3840

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  
**06 / 17 / 2014**

**Transaction ID : C9853498**

Amount of Each Receipt this Period  
**50.00**

**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 20 OF 143
	<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)  
**Friends of Lois Capps**

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

Mailing Address 1777 Las Tunas Rd

City Santa Barbara State CA Zip Code 93103-1719

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

Name of Employer Self Occupation Architect

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 16 / 2014**

**Transaction ID : C9361522**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Koene Graves**

Mailing Address 2525 Old Grove Ln

City Paso Robles State CA Zip Code 93446-9438

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

Name of Employer GCFS, INC Occupation EXEC

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 24 / 2014**

**Transaction ID : C9857117**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Beth Green**

Mailing Address 279 King James Court

City Goleta State CA Zip Code 93117

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

Name of Employer Loma Linda University Medical Center Occupation RN-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  
**05 / 24 / 2014**

**Transaction ID : C9360317**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Scott Grundfor**

Mailing Address 2265 Cattle Run Ln

City Arroyo Grande State CA Zip Code 93420-4942

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

Name of Employer scott grundfor co Occupation auto restoration

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : C9853518**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 1490 Ridge Road

City Templeton State CA Zip Code 93465

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

Name of Employer Tablas Creek Vineyard Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 09 / 2014

**Transaction ID : C9857299**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Amy Haddad**

Mailing Address 2301 Champlain St NW Apt 309

City Washington State DC Zip Code 20009-8703

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

Name of Employer AMCHP Occupation Government Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : C9851532**

Amount of Each Receipt this Period  
250.00

**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 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Benjamin Hammett**

Mailing Address 301 Lowell Avenue

City Palo Alto State CA Zip Code 93201

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

Name of Employer Self Occupation Psychologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : C9853557**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Annemarie Hargadon**

Mailing Address 1210 Marina Cir

City Davis State CA Zip Code 95616-2736

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

Name of Employer self Occupation physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : C9362863**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Sue Hawes**

Mailing Address 506 Yankee Farm Rd

City Santa Barbara State CA Zip Code 93109-1060

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

Name of Employer Retired Occupation Retired attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : C9361446**

Amount of Each Receipt this Period  
250.00

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

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

2275.00

**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 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Sue Hawes**

Mailing Address 506 Yankee Farm Rd

City Santa Barbara State CA Zip Code 93109-1060

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

Name of Employer Retired Occupation Retired attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : C9360950**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 219 Indio Dr

City Pismo Beach State CA Zip Code 93449-1513

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

Name of Employer CENTRAL COAST ORTHOPAEDIC MEDICINE Occupation Doctor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : C9857231**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**GORDON HESS**

Mailing Address 415 Calle Granada

City Santa Barbara State CA Zip Code 93105-2704

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

Name of Employer Self Occupation Marriage and Family Therapist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
458.34

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 12 / 2014

**Transaction ID : C9426700**

Amount of Each Receipt this Period  
50.00

**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 24 OF 143
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Pauline High</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 13 / 2014	
Mailing Address 278 Marlene Drive		<b>Transaction ID : C9853512</b>	
City San Luis Obispo	State CA	Zip Code 93405	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer N/A	Occupation Retired Teacher		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00		

Full Name (Last, First, Middle Initial) <b>B. Roger Himovitz</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 05 / 2014	
Mailing Address PO Box 5664		<b>Transaction ID : C9857281</b>	
City Santa Barbara	State CA	Zip Code 93150-5664	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Self-employed	Occupation Investor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) <b>C. Anne Howard</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2014	
Mailing Address 950 Dena Way		<b>Transaction ID : C9361045</b>	
City Santa Barbara	State CA	Zip Code 93111-1103	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Trinity Episcopal Church	Occupation priest		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2950.00
<b>TOTAL</b> 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 25 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Gabrielle Hubbard**

Mailing Address 311 Morro Ave

City Pismo Beach State CA Zip Code 93449-1811

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 **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 20 / 2014**

**Transaction ID : C9854284**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Kathleen Hurre**

Mailing Address 5101 Oakhurst Dr

City Cambria State CA Zip Code 93428-2916

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

Name of Employer retired Occupation na

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **310.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 24 / 2014**

**Transaction ID : C9360164**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kathleen Hurre**

Mailing Address 5101 Oakhurst Dr

City Cambria State CA Zip Code 93428-2916

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

Name of Employer retired Occupation na

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **310.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 24 / 2014**

**Transaction ID : C9853628**

Amount of Each Receipt this Period  
**50.00**

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

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

**150.00**

**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 143
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Roger Ingham</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 1947 Eucalyptus Hill Rd		<b>Transaction ID : C9362828</b>
City Santa Barbara	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer UCSB	Occupation Professor	
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>B. Roger Ingham</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 1947 Eucalyptus Hill Rd		<b>Transaction ID : C9857422</b>
City Santa Barbara	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer UCSB	Occupation Professor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) <b>C. Richard Jacoby</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 303 W Walnut Ave		<b>Transaction ID : C9361512</b>
City Lompoc	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	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	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Stewart Jenkins**

Mailing Address 1336 Morro St

City San Luis Obispo State CA Zip Code 93401-4028

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

Name of Employer self Occupation attorney

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  
**05 / 15 / 2014**

**Transaction ID : C9361580**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mona Jennings**

Mailing Address 1390 Mail Pouch Lane

City San Luis Obispo State CA Zip Code 93405

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 **1550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 30 / 2014**

**Transaction ID : C10100385**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mona Jennings**

Mailing Address 1390 Mail Pouch Lane

City San Luis Obispo State CA Zip Code 93405

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 **1550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10100386**

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 28 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Warren Jensen**

Mailing Address 382 Woodbridge St

City San Luis Obispo State CA Zip Code 93401-5513

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : C9362371**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Warren Jensen**

Mailing Address 382 Woodbridge St

City San Luis Obispo State CA Zip Code 93401-5513

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C9854645**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 149 Palm Court Dr

City Santa Maria State CA Zip Code 93454-6643

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  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2014

**Transaction ID : C9344819**

Amount of Each Receipt this Period  
500.00

**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 29 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Judy M. Judd**

Mailing Address 1241 Island Dr  
Apt 101

City Ann Arbor State MI Zip Code 48105-2006

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  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : C9854280**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Cheryl Justice**

Mailing Address 7127 Hollister Ave  
Ste 25A

City Goleta State CA Zip Code 93117-2857

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

Name of Employer retired Occupation retired attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
950.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C9855923**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Peter Karoff**

Mailing Address 1052 Camino Del Retiro

City Santa Barbara State CA Zip Code 93110-1007

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

Name of Employer University of California at Santa Barb Occupation Professor: Global and International St

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : C9398137**

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 30 OF 143
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>Todd Katz</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2014
Mailing Address 3478 Gregory Ct		<b>Transaction ID : C9853270</b>
City San Luis Obispo	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer retired	Occupation retired	Election Cycle-to-Date 350.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Rebecca Kaye</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 923 Buena Vista Dr		<b>Transaction ID : C9358209</b>
City Santa Barbara	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer none	Occupation homemaker	Election Cycle-to-Date 1100.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Brendan Kelsay</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 1124 10th St NW Apt 2B		<b>Transaction ID : C9363675</b>
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Clear Channel	Occupation Government Affairs	Election Cycle-to-Date 250.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> 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 31 OF 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Frank Kelton**

Mailing Address 1710 Condado Vista Ct

City Arroyo Grande State CA Zip Code 93420-4904

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

Name of Employer San Luis Ambulance Occupation 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  
 06 / 23 / 2014

**Transaction ID : C9854299**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Elaine B. Kendall**

Mailing Address 1185 Fife Ln

City Santa Barbara State CA Zip Code 93108-2254

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

Name of Employer Self Occupation Writer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : C9853509**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Herbert Kendall**

Mailing Address 1185 Fife Ln

City Montecito State CA Zip Code 93108-2254

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  
 06 / 13 / 2014

**Transaction ID : C9853508**

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 32 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Jonathan King**

Mailing Address 734 Nowita Pl

City State Zip Code  
Venice CA 90291-3835

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

Name of Employer Occupation  
Participant Media Film Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : C9363143**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Paula Knickerbocker**

Mailing Address PO Box 788

City State Zip Code  
Santa Ynez CA 93460

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  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : C9361038**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Susan Knowles**

Mailing Address 17150 Nuevo Pl

City State Zip Code  
Santa Margarita CA 93453-9790

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

Name of Employer Occupation  
Self employed accountant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1025.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2014

**Transaction ID : C9853540**

Amount of Each Receipt this Period  
200.00

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

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

950.00



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

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

FOR LINE NUMBER: PAGE 33 OF 143  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Bette J. Kulp**

Mailing Address 2362 Meadow St

City San Luis Obispo State CA Zip Code 93401-5628

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  
 350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2014

**Transaction ID : C9857295**

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Julie Kummel**

Mailing Address 5100 E Camino Cielo

City Santa Barbara State CA Zip Code 93105-9762

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

Name of Employer N/A Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1150.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : C9362865**

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert Kuziara**

Mailing Address 310 Chaney Ave

City Cayucos State CA Zip Code 93430-1810

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  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : C9360936**

Amount of Each Receipt this Period  
 400.00

**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: PAGE 34 OF 143  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

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

Mailing Address 310 Chaney Ave

City Cayucos State CA Zip Code 93430-1810

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 **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 19 / 2014**

**Transaction ID : C9361060**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**James R. Landreth**

Mailing Address 613 Jeffrey Dr

City San Luis Obispo State CA Zip Code 93405-1021

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  
**06 / 13 / 2014**

**Transaction ID : C9853510**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Terilynn Langsev**

Mailing Address 965 Village 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  
**05 / 18 / 2014**

**Transaction ID : C9361039**

Amount of Each Receipt this Period  
**500.00**

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

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

**700.00**

**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 143
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>Lionel Lerner</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 410 Woodland Dr		<b>Transaction ID : C10099751</b>
City Arroyo Grande	State CA	Zip Code 93420-3924
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) <b>Daniel Levin</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 2751 Motor Ave		<b>Transaction ID : C9398048</b>
City Los Angeles	State CA	Zip Code 90064-3458
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer none	Occupation director	
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>Kenneth Levine</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 1425 Hillcrest Dr		<b>Transaction ID : C9361589</b>
City Arroyo Grande	State CA	Zip Code 93420-2212
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer retired	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	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> 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 36 OF 143  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Daniel Lewis**

Mailing Address 1023 Pacific St

City San Luis Obispo State CA Zip Code 93401-3623

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

Name of Employer Sierra Vista Regional Medical Center Occupation Oncologist

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  
 05 / 27 / 2014

**Transaction ID : C9360630**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 2418 Santa Barbara St

City Santa Barbara State CA Zip Code 93105-3550

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

Name of Employer self Occupation writer-speaker

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  
 06 / 27 / 2014

**Transaction ID : C9855847**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 2490 Nightshade Pl

City Arroyo Grande State CA Zip Code 93420-4944

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

Name of Employer Mission Community Bank Occupation Banker

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  
 06 / 19 / 2014

**Transaction ID : C9854300**

Amount of Each Receipt this Period  
 1000.00

**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 37 OF 143
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Craig Madsen</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 1416 Dover Rd		<b>Transaction ID : C9855836</b>
City Santa Barbara	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer none	Occupation none	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Marilyn Magid</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address PO Box 5755		<b>Transaction ID : C9398080</b>
City Santa Barbara	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Homemaker	Occupation Homemaker	
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) <b>C. Ursula Mahlendorf</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 1505 Portesuello Ave		<b>Transaction ID : C9426253</b>
City Santa Barbara	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer N/A	Occupation professor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 425.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> 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 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Cappo**

**A.** Full Name (Last, First, Middle Initial)  
**Patricia Marquart**

Mailing Address 112 Vista Del Mar Dr

City Santa Barbara State CA Zip Code 93109-1050

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

Name of Employer Center for Developmental Play and Lear Occupation MFT Therapist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 02 / 2014**

**Transaction ID : C9363159**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Glen David Mason**

Mailing Address 2625 N Pocomoke St

City Arlington State VA Zip Code 22207-1003

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

Name of Employer Mason Consulting LLC Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C9856741**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address PO Box 276  
46 Cypress Glen

City Cayucos State CA Zip Code 93430-0276

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  
**06 / 16 / 2014**

**Transaction ID : C9853519**

Amount of Each Receipt this Period  
**100.00**

**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 39 OF 143
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>Marni McGee</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 25 / 2014
Mailing Address 768 Chelham Way		<b>Transaction ID : C9361113</b>
City Santa Barbara	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00	

Full Name (Last, First, Middle Initial) <b>Diana Meehan</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address PO Box 1066		<b>Transaction ID : C9398114</b>
City Somis	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Goldberg & Meehan	Occupation Business Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Suzanne Mellichamp</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 1133 Calle De Los Amigos		<b>Transaction ID : C9398165</b>
City Santa Barbara	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer UCSB	Occupation professor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1225.00
<b>TOTAL</b> 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 40 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Patricia Melsheimer**

Mailing Address 2640 Belgian Pl

City Arroyo Grande State CA Zip Code 93420-5347

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  
1050.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2014

**Transaction ID : C9343487**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Beth Meltzer**

Mailing Address 727 N Camden Dr

City Beverly Hills State CA Zip Code 90210-3204

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

Name of Employer Self-Employed Occupation Child Psychologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : C9361432**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**JoAnne Milburn**

Mailing Address 633 Ramona Ave  
Spc 72

City Los Osos State CA Zip Code 93402-5172

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  
415.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : C9857203**

Amount of Each Receipt this Period  
50.00

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

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

1050.00



**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 41 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Warren Miller**

Mailing Address 980 Canon Rd

City Santa Barbara State CA Zip Code 93110-2125

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

Name of Employer N/A 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  
 06 / 28 / 2014

**Transaction ID : C9857278**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1895 Eucalyptus Hill Rd

City Santa Barbara State CA Zip Code 93108-1828

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

Name of Employer Self Occupation Businesswoman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2014

**Transaction ID : C9361521**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 141 Romaine Dr

City Santa Barbara State CA Zip Code 93105-4146

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

Name of Employer Move, Inc Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : C9857215**

Amount of Each Receipt this Period  
500.00

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

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

1600.00

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

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

FOR LINE NUMBER: PAGE 42 OF 143  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Nancy Murdock**

Mailing Address 319 W Los Olivos St  
# A

City Santa Barbara State CA Zip Code 93105-4306

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

Name of Employer Sansum Clinic Occupation MFT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **695.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10099757**

Amount of Each Receipt this Period  
**30.00**

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

Mailing Address 319 W Los Olivos St  
# A

City Santa Barbara State CA Zip Code 93105-4306

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

Name of Employer Sansum Clinic Occupation MFT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **695.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C9856699**

Amount of Each Receipt this Period  
**15.00**

**C.** Full Name (Last, First, Middle Initial)  
**Nancy Murdock**

Mailing Address 319 W Los Olivos St  
# A

City Santa Barbara State CA Zip Code 93105-4306

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

Name of Employer Sansum Clinic Occupation MFT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **695.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C9857392**

Amount of Each Receipt this Period  
**15.00**

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

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

**60.00**

**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 43 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Jack Murray**

Mailing Address **21 W Quinto St**

City **Santa Barbara** State **CA** Zip Code **93105-3922**

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 **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : C9854358**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Toby Myerson**

Mailing Address **1056 5th Ave**

City **New York** State **NY** Zip Code **10028-0112**

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

Name of Employer **Paul, Weiss, Rikfind, Wharton & Garris** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 27 / 2014**

**Transaction ID : C9360631**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Toby Myerson**

Mailing Address **1056 5th Ave**

City **New York** State **NY** Zip Code **10028-0112**

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

Name of Employer **Paul, Weiss, Rikfind, Wharton & Garris** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 27 / 2014**

**Transaction ID : C9361059**

Amount of Each Receipt this Period  
**900.00**

**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 44 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Emily Nawalinski**

Mailing Address 94 Junco Dr

City Santa Cruz State CA Zip Code 95060-9727

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 **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C9856567**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Lawrence H. Nelson**

Mailing Address 1743 Pinecove Dr

City San Luis Obispo State CA Zip Code 93405-6839

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 **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 19 / 2014**

**Transaction ID : C9854298**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**William Nisbet**

Mailing Address 126 Garces Dr

City San Francisco State CA Zip Code 94132-2342

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 **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 16 / 2014**

**Transaction ID : C9853544**

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 45 OF 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Loretta Novak**

Mailing Address 5221 Pembroke  
capps

City Cambria State CA Zip Code 93428

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  
650.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2014

**Transaction ID : C9361515**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Andrew Okun**

Mailing Address 11911 Westminster Pl

City Los Angeles State CA Zip Code 90066-2827

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  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : C9361619**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Daniel Ovadia**

Mailing Address 857 Veronica Springs Rd

City Santa Barbara State CA Zip Code 93105-4527

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

Name of Employer Self Occupation MD

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C9855037**

Amount of Each Receipt this Period  
250.00

**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 46 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Mary N. Parker**

Mailing Address 539 Cerro Romauldo Ave

City San Luis Obispo State CA Zip Code 93405-1128

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 **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : C9857232**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Alyce Parsons**

Mailing Address 1 North Calle Caesar Chavez

City Santa Barbara State CA Zip Code 93103

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

Name of Employer Parsons Group Occupation 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  
**05 / 19 / 2014**

**Transaction ID : C9361444**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Forbes Perkins**

Mailing Address 1482 East Valley Rd Ste 323

City Santa Barbara State CA Zip Code 93108

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

Name of Employer Self Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 01 / 2014**

**Transaction ID : C10100384**

Amount of Each Receipt this Period  
**125.00**

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

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

**475.00**

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

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

FOR LINE NUMBER: PAGE 47 OF 143  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Christopher Pilafian**

Mailing Address 16 West Mission St Suite S

City Santa Barbara State CA Zip Code 93101

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

Name of Employer UCSB Occupation artist/educator

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
265.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : C9359827**

Amount of Each Receipt this Period  
15.00

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

Mailing Address 16 West Mission St Suite S

City Santa Barbara State CA Zip Code 93101

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

Name of Employer UCSB Occupation artist/educator

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
265.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : C9853391**

Amount of Each Receipt this Period  
15.00

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

Mailing Address 9465 Wilshire Blvd Ste 920

City Beverly Hills State CA Zip Code 90212-2608

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

Name of Employer Montecito Pictures Occupation Producer

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  
 06 / 11 / 2014

**Transaction ID : C9857283**

Amount of Each Receipt this Period  
1000.00

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

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

1030.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Paul Popenoe**

Mailing Address 3979 S Peardale Dr

City Lafayette State CA Zip Code 94549-2823

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  
1700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 24 / 2014

**Transaction ID : C9361586**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Joseph Proctor**

Mailing Address 2204 Solmar Dr

City Silver Spring State MD Zip Code 20904-5452

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  
 05 / 17 / 2014

**Transaction ID : C9361441**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Jeremy Rabinovitz**

Mailing Address 11717 Greenlane Dr

City Potomac State MD Zip Code 20854-3515

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

Name of Employer MLStrategies Occupation Senior Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : C9357296**

Amount of Each Receipt this Period  
250.00

**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 49 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Lillian Raffel**

Mailing Address 601 N Roxbury Dr

City Beverly Hills State CA Zip Code 90210-3240

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

Name of Employer retired Occupation none

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : C9851706**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Anne Ramacher**

Mailing Address 5868 Alexandria Place

City Stockton State CA Zip Code 95207

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  
360.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : C9853533**

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
**Eugene Renkin**

Mailing Address 1515 Shasta Dr  
Apt 1204

City Davis State CA Zip Code 95616-6676

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

Name of Employer Not Employed 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  
 05 / 15 / 2014

**Transaction ID : C9361566**

Amount of Each Receipt this Period  
100.00

**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 50 OF 143
	<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)  
**Friends of Lois Capps**

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

Mailing Address 1814 Anacapa St

City Santa Barbara State CA Zip Code 93101-1029

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

Name of Employer Retired SBCC President 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  
 05 / 27 / 2014

**Transaction ID : C9361036**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1135 Oriole Rd

City Santa Barbara State CA Zip Code 93108-2438

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

Name of Employer UCSB Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : C9857092**

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
**Brian Rosenstein**

Mailing Address 411 N Oakhurst Dr  
Unit 102

City Beverly Hills State CA Zip Code 90210-4038

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

Name of Employer Keiler Holdings Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : C9398043**

Amount of Each Receipt this Period  
1000.00

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

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

1450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Melville Sahyun**

Mailing Address 2458 Hillwood Dr E

City Saint Paul State MN Zip Code 55119-5573

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 Y Y  
**06 / 17 / 2014**

**Transaction ID : C9854293**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Anne Schowe**

Mailing Address 930 Monte Drive

City Santa Barbara State CA Zip Code 93110

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  
**06 / 30 / 2014**

**Transaction ID : C9856700**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Joseph A. Schwartz**

Mailing Address 1428 Phillips Ln

City San Luis Obispo State CA Zip Code 93401-2537

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

Name of Employer Self Occupation Physician

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  
**06 / 27 / 2014**

**Transaction ID : C9856049**

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 52 OF 143
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Gregory Scott</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2014
Mailing Address 1645 Miramesa Dr		<b>Transaction ID : C9344484</b>
City Santa Barbara	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer None	Occupation None	Amount of Each Receipt this Period 900.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 900.00	

Full Name (Last, First, Middle Initial) <b>B. Gregory Scott</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 1645 Miramesa Dr		<b>Transaction ID : C9851536</b>
City Santa Barbara	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer None	Occupation None	Amount of Each Receipt this Period 900.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 900.00	

Full Name (Last, First, Middle Initial) <b>C. Kermit Seehawer</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1134 Atlantic City Ave		<b>Transaction ID : C9853503</b>
City Grover Beach	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer None	Occupation Retired	Amount of Each Receipt this Period 475.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 475.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 53 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Kermit Seehawer**

Mailing Address 1134 Atlantic City Ave

City State Zip Code  
Grover Beach CA 93433-1107

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  
**475.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 23 / 2014**

**Transaction ID : C9857245**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Abby Sher**

Mailing Address 3200 Airport Avenue #27

City State Zip Code  
Santa Monica CA 90405-6122

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

Name of Employer Occupation  
self investments

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : C10099760**

Amount of Each Receipt this Period  
**1500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Zora Shinn**

Mailing Address 705 Mesa Dr

City State Zip Code  
Solvang CA 93463-2046

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  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C9857415**

Amount of Each Receipt this Period  
**250.00**

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

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

**1950.00**

**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 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Jill Sideman**

Mailing Address 14 Mara Vista Ct

City Tiburon State CA Zip Code 94920-1424

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

Name of Employer CH2MHILL Occupation Executive

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 Y  
**06 / 23 / 2014**

**Transaction ID : C9857118**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Hans Signer**

Mailing Address PO Box 3147

City Paso Robles State CA Zip Code 93447-3147

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

Name of Employer N/A Occupation 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  
**06 / 27 / 2014**

**Transaction ID : C9857189**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Naida K Simpson**

Mailing Address 1444 Las Encinas Dr

City Los Osos State CA Zip Code 93402-4520

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 **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C9857213**

Amount of Each Receipt this Period  
**500.00**

**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 55 OF 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Geoffrey Slaff**

Mailing Address 1400 Wyant Rd

City Santa Barbara State CA Zip Code 93108-2520

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

Name of Employer Amgen Occupation Executive

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  
**05 / 27 / 2014**

**Transaction ID : C9361409**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Linda Slattery**

Mailing Address 1600 Maddux Ln

City McLean State VA Zip Code 22101-3200

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

Name of Employer self Occupation counselor

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  
**05 / 15 / 2014**

**Transaction ID : C9343534**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Betty Smay**

Mailing Address 1152 Vard Loomis Ln

City Arroyo Grande State CA Zip Code 93420-2923

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 Y Y  
**05 / 17 / 2014**

**Transaction ID : C9361050**

Amount of Each Receipt this Period  
**50.00**

**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 56 OF 143
	<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)  
**Friends of Lois Capps**

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

Mailing Address 4589 Auhay Drive

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 **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 17 / 2014**

**Transaction ID : C9361571**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 1027 Senda Verde Apt B

City Santa Barbara State CA Zip Code 93105

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

Name of Employer UCSB Occupation Professor Emeritus

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : C9857085**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 1303 Garden St

City San Luis Obispo State CA Zip Code 93401-3915

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

Name of Employer Self Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 19 / 2014**

**Transaction ID : C9854297**

Amount of Each Receipt this Period  
**100.00**

**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 57 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Julia Springer**

Mailing Address **PO Box 904**

City **Summerland** State **CA** Zip Code **93067-0904**

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  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : C9853529**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Prudence Squier**

Mailing Address **5631 W Camino Cielo**

City **Santa Barbara** State **CA** Zip Code **93105-9706**

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  
**450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 20 / 2014**

**Transaction ID : C9361433**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Linda Stafford Burrows**

Mailing Address **1683 Overdel Ln**

City **Solvang** State **CA** Zip Code **93463-2154**

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

Name of Employer **Self** Occupation **Community Volunteer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 23 / 2014**

**Transaction ID : C9361590**

Amount of Each Receipt this Period  
**250.00**

**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 58 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Melinda Staveley**

Mailing Address 834 Via Covello

City Santa Barbara State CA Zip Code 93110-2036

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

Name of Employer Santa Barbara Cottage Hospital Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : C9854304**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address P.O. Box 5595

City Santa Barbara State CA Zip Code 93150

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

Name of Employer none Occupation retired lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 23 / 2014**

**Transaction ID : C9857285**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Daniel Stubbs**

Mailing Address 1691 Tanglewood Dr

City San Luis Obispo State CA Zip Code 93401-6039

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

Name of Employer Self Occupation Author

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : C9854261**

Amount of Each Receipt this Period  
**100.00**

**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 59 OF 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Jo Swalley**

Mailing Address 3883 Cinco Amigos

City Santa Barbara State CA Zip Code 93105-4440

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

Name of Employer SoCal Swimming Occupation Sport Administrator

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  
**06 / 30 / 2014**

**Transaction ID : C9857086**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 3698 Clark Valley Rd

City Los Osos State CA Zip Code 93402-4620

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

Name of Employer self Occupation investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 22 / 2014**

**Transaction ID : C9360941**

Amount of Each Receipt this Period  
**750.00**

**C.** Full Name (Last, First, Middle Initial)  
**Joyce Thibodeaux**

Mailing Address 113 Oakdale Loop

City Houma State LA Zip Code 70360-5932

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 **214.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 30 / 2014**

**Transaction ID : C9361964**

Amount of Each Receipt this Period  
**25.00**

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

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

**875.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Joyce Thibodeaux**

Mailing Address 113 Oakdale Loop

City Houma	State LA	Zip Code 70360-5932
---------------	-------------	------------------------

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  
**214.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 11 / 2014**

**Transaction ID : C9426171**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**R. Murray Thomas**

Mailing Address 1436 Las Encinas Dr

City Los Osos	State CA	Zip Code 93402-4520
------------------	-------------	------------------------

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  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 18 / 2014**

**Transaction ID : C9853551**

Amount of Each Receipt this Period  
**300.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mary Thompson**

Mailing Address 1435 Crestline Dr

City Santa Barbara	State CA	Zip Code 93105-4608
-----------------------	-------------	------------------------

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  
**650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : C9854470**

Amount of Each Receipt this Period  
**500.00**

**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 61 OF 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Gregory Thorpe</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2014
Mailing Address 112 Calle Bello		<b>Transaction ID : C9853496</b>
City Santa Barbara	State CA	
Zip Code 93108-1806		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer O'Melveny & Myers	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. Lawrence Wallin</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 895 Toro Canyon Rd		<b>Transaction ID : C9398049</b>
City Santa Barbara	State CA	
Zip Code 93108		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Retired	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) <b>C. Patricia Ward</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 412 Stanley Dr capps		<b>Transaction ID : C9361890</b>
City Santa Barbara	State CA	
Zip Code 93105		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 275.00
Name of Employer retired	Occupation clinical social worker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1025.00
<b>TOTAL</b> 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 62 OF 143
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Patricia Ward</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 412 Stanley Dr capps		<b>Transaction ID : C9856614</b>	
City Santa Barbara	State CA	Zip Code 93105	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer retired	Occupation clinical social worker		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00		

Full Name (Last, First, Middle Initial) <b>B. Robert Warner</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2014	
Mailing Address 3860 Sunset Rd		<b>Transaction ID : C9357406</b>	
City Santa Barbara	State CA	Zip Code 93110-1541	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Retired	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		

Full Name (Last, First, Middle Initial) <b>C. Laurie Weaver</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 11 / 2014	
Mailing Address 652 University Dr		<b>Transaction ID : C9857300</b>	
City Lompoc	State CA	Zip Code 93436-7838	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Not Employed/Homemaker	Occupation Homemaker		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	375.00
<b>TOTAL</b> 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 63 OF 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Susan Weir**

Mailing Address 2 Larchwood Dr

City Cambridge State MA Zip Code 02138-4618

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

Name of Employer Jordan Diabetes Center Occupation Scientist

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  
 06 / 20 / 2014

**Transaction ID : C9854286**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert E. Weiss**

Mailing Address 3973 Roblar Ave

City Santa Ynez State CA Zip Code 93460-9727

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

Name of Employer self Occupation lawyer

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  
 06 / 27 / 2014

**Transaction ID : C9854951**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Lorraine Welch**

Mailing Address 248 Sugarbush Farm Rd

City Colchester State VT Zip Code 05446-7518

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

Name of Employer retired Occupation Registered Nurse

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
252.78

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : C9854640**

Amount of Each Receipt this Period  
50.00

**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: PAGE 64 OF 143  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Herb West**

Mailing Address 171 Prospect Ave

City San Anselmo State CA Zip Code 94960

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 **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 14 / 2014**

**Transaction ID : C9853525**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Chris Westover**

Mailing Address 5929 Acacia Ave

City Oakland State CA Zip Code 94618-1853

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

Name of Employer self 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  
**05 / 29 / 2014**

**Transaction ID : C9361383**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 7610 San Marcos Rd

City Atascadero State CA Zip Code 93422-4060

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  
**06 / 18 / 2014**

**Transaction ID : C9853552**

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 65 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Valerie C Williams**

Mailing Address 1527 Meadow Cir

City State Zip Code  
Carpinteria CA 93013-1740

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  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : C9853511**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Mona Wise**

Mailing Address 4575 Nueces Dr

City State Zip Code  
Santa Barbara CA 93110-2046

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  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 16 / 2014

**Transaction ID : C9361578**

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
**Marion Wolff**

Mailing Address 3128 Spring Ct

City State Zip Code  
San Luis Obispo CA 93401-6014

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

Name of Employer Occupation  
Cal Poly 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  
 06 / 25 / 2014

**Transaction ID : C9857182**

Amount of Each Receipt this Period  
100.00

**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 66 OF 143
	<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)  
**Friends of Lois Capps**

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

Mailing Address 6980 San Gabriel Rd

City Atascadero State CA Zip Code 93422

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

Name of Employer Ground Control Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 28 / 2014**

**Transaction ID : C9360825**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 6980 San Gabriel Rd

City Atascadero State CA Zip Code 93422

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

Name of Employer Ground Control Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 28 / 2014**

**Transaction ID : C9856095**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Anna Grotenhuis**

Mailing Address 2125 Ten Acre Rd

City Santa Barbara State CA Zip Code 93108-2227

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

Name of Employer Grotenhuis Investments, Inc. Occupation Real Estate Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 30 / 2014**

**Transaction ID : C9362342A**

Amount of Each Receipt this Period  
**500.00**

\* Earmarked Contribution: See Below

**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 67 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**JSTREETPAC**

Mailing Address PO Box 33106

City Washington State DC Zip Code 20033-0106

FEC ID number of contributing federal political committee. **C** C00441949

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2875.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : C9362342AB**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

Mailing Address 1901 Avenue of the Stars Ste 620

City Los Angeles State CA Zip Code 90067-6034

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  
3600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : C9857275A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**JSTREETPAC**

Mailing Address PO Box 33106

City Washington State DC Zip Code 20033-0106

FEC ID number of contributing federal political committee. **C** C00441949

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2875.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : C9857275AB**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**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 68 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Melodee Kornacker**

Mailing Address PO Box 2128207

City Columbus State OH Zip Code 43221

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 Y Y  
 05 / 30 / 2014

**Transaction ID : C9362344A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**JSTREETPAC**

Mailing Address PO Box 33106

City Washington State DC Zip Code 20033-0106

FEC ID number of contributing federal political committee. **C** C00441949

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2875.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : C9362344AB**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Luis Lainer**

Mailing Address 10788 Bellagio Rd

City Los Angeles State CA Zip Code 90077-3730

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

Name of Employer Lainer Development Occupation real estate 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 Y  
 05 / 28 / 2014

**Transaction ID : C9857282A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

**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 69 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**JSTREETPAC**

Mailing Address **PO Box 33106**

City **Washington** State **DC** Zip Code **20033-0106**

FEC ID number of contributing federal political committee. **C C00441949**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
2875.00

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 28 / 2014**

**Transaction ID : C9857282AB**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Daniele Baierlein**

Mailing Address **1401 17th Street, NW, Apt. 708**

City **Washington** State **DC** Zip Code **20036**

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

Name of Employer **Podesta Group** Occupation **Principal**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : C10100367A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**ActBlue Vender Services**

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
8397.47

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10100367AB**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**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 70 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Elizabeth Barnett**

Mailing Address 219 9th Street, NE

City Washington State DC Zip Code 20002

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

Name of Employer Avenue Solutions Occupation Lobbyist

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  
 06 / 30 / 2014

**Transaction ID : C10100368A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**ActBlue Vender Services**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8397.47

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10100368AB**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Adam Bronfman**

Mailing Address 2300 Lucky John Dr

City Park City State UT Zip Code 84060-6913

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

Name of Employer Mighty Bum LLC Occupation consultant

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  
 06 / 30 / 2014

**Transaction ID : C10100369A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

**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 71 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**ActBlue Vender Services**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8397.47

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10100369AB**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Kathleen Callanan**

Mailing Address 9925 Thornwood Rd

City Kensington State MD Zip Code 20895

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

Name of Employer Occupation  
AHIP VP, Federal Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : C10100360A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**ActBlue Vender Services**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8397.47

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10100360AB**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**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 72 OF 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Nora Connors**

Mailing Address 1725 19th St. NW

City Washington State DC Zip Code 20009

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

Name of Employer Podesta Group Occupation Principal

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  
 06 / 26 / 2014

**Transaction ID : C10100366A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**ActBlue Vender Services**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8397.47

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10100366AB**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Sarah Egge**

Mailing Address 5618 16th Street North

City Arlington State VA Zip Code 22205

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

Name of Employer Washington Council Ernst & Young Occupation Senior 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  
 06 / 25 / 2014

**Transaction ID : C10100365A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

**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 73 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**ActBlue Vender Services**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8397.47

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10100365AB**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Neleen Eisinger**

Mailing Address 1438 Corcoran St, NW

City Washington State DC Zip Code 20009

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

Name of Employer Occupation  
Rubin Health Policy Consulting, LLC Consultant

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  
 06 / 24 / 2014

**Transaction ID : C10100359A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**ActBlue Vender Services**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8397.47

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10100359AB**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**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 74 OF 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Micaela Fernandez**

Mailing Address 201 I Street NE Apt 522

City Washington State DC Zip Code 20002

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

Name of Employer Walmart Occupation Government Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : C10100353A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**ActBlue Vender Services**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8397.47

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10100353AB**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Pamela Flynt Tambo**

Mailing Address 71 Manchester Pl

City Goleta State CA Zip Code 93117-1929

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  
256.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : C9852828A**

Amount of Each Receipt this Period  
1.00

\* Earmarked Contribution: See Below

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

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

251.00

**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 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**ActBlue Vender Services**

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **8397.47**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 26 / 2014**

**Transaction ID : C9852828AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1.00**

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

Mailing Address **1211 N Harrison Street**

City **Arlington** State **VA** Zip Code **22205-2434**

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

Name of Employer **Alpine Group, Inc.** Occupation **Government Relations Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 24 / 2014**

**Transaction ID : C10100357A**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **500.00**

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**ActBlue Vender Services**

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **8397.47**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10100357AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **500.00**

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**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 76 OF 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Anne MacMillan**

Mailing Address 2933 Tilden ST NW

City Washington State DC Zip Code 20008

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

Name of Employer USDA Occupation Deputy COS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 22 / 2014

**Transaction ID : C9857359A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**ActBlue Vender Services**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8397.47

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 22 / 2014

**Transaction ID : C9857359AB**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Sandra Mathias**

Mailing Address 1766 Shepherd Dr

City Paso Robles State CA Zip Code 93446-3608

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

Name of Employer self Occupation Disability Advocate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
255.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : C9852839A**

Amount of Each Receipt this Period  
5.00

\* Earmarked Contribution: See Below

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

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

505.00

**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 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**ActBlue Vender Services**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8397.47

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 26 / 2014

**Transaction ID : C9852839AB**

Amount of Each Receipt this Period  
5.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Joy McGlaun**

Mailing Address 4211 Alton Place

City Washington State DC Zip Code 20016

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

Name of Employer Occupation  
Boeing Policy 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  
 06 / 04 / 2014

**Transaction ID : C9857311A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**ActBlue Vender Services**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8397.47

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 08 / 2014

**Transaction ID : C9857311AB**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**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 78 OF 143
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Catlin O'neill**

Mailing Address 817 L Street NE

City Washington State DC Zip Code 20002

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

Name of Employer Facebook Occupation Manager, Public Policy

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : C9857358A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**ActBlue Vender Services**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8397.47

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 22 / 2014

**Transaction ID : C9857358AB**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

Mailing Address 217 Commercial Street

City Portland State ME Zip Code 04101

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

Name of Employer Trust Asset Management Occupation Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10100370A**

Amount of Each Receipt this Period  
2600.00

\* Earmarked Contribution: See Below

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

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

2850.00

**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 143
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>ActBlue Vender Services</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2014
Mailing Address PO Box 382110		<b>Transaction ID : C10100370AB</b>
City Cambridge	State MA	Zip Code 02238-2110
FEC ID number of contributing federal political committee. C C00401224	Amount of Each Receipt this Period 2600.00	
Name of Employer	Occupation Conduit total listed in Agg. field	<b>[MEMO ITEM]</b> Note: Above Contribution earmarked through this organization.
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 8397.47	

Full Name (Last, First, Middle Initial) <b>Karissa Willhite</b>		Date of Receipt MM / DD / YYYY 06 / 24 / 2014
Mailing Address 1358 Jackson St, NE		<b>Transaction ID : C10100356A</b>
City Washington	State DC	Zip Code 20017
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Ogilvy Government Relations	Occupation Lobbyist	* Earmarked Contribution: See Below
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>ActBlue Vender Services</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2014
Mailing Address PO Box 382110		<b>Transaction ID : C10100356AB</b>
City Cambridge	State MA	Zip Code 02238-2110
FEC ID number of contributing federal political committee. C C00401224	Amount of Each Receipt this Period 250.00	
Name of Employer	Occupation Conduit total listed in Agg. field	<b>[MEMO ITEM]</b> Note: Above Contribution earmarked through this organization.
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 8397.47	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	65301.00

**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 143
	<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 S Capitol St SE  
FI 2

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5797.84

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 19 / 2014

**Transaction ID : C9398189**

Amount of Each Receipt this Period  
31.20

\* In-Kind: in-kind event catering

**B.** Full Name (Last, First, Middle Initial)  
**DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 S Capitol St SE  
FI 2

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5797.84

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 21 / 2014

**Transaction ID : C9398191**

Amount of Each Receipt this Period  
515.20

\* In-Kind: in-kind event catering

**C.** Full Name (Last, First, Middle Initial)  
**DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 S Capitol St SE  
FI 2

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5797.84

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 21 / 2014

**Transaction ID : C9398192**

Amount of Each Receipt this Period  
69.00

\* In-Kind: in-kind event catering

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

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

615.40



**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 143
<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)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 S Capitol St SE  
FI 2

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5797.84

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 03 / 2014

**Transaction ID : C9398186**

Amount of Each Receipt this Period  
3095.00

**B.** Full Name (Last, First, Middle Initial)  
**DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 S Capitol St SE  
FI 2

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5797.84

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 24 / 2014

**Transaction ID : C9857230**

Amount of Each Receipt this Period  
798.00

\* In-Kind: in-kind event catering

**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).....

3893.00

4508.40

**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 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**AIR LINE PILOTS ASSOCIATION PAC**

Mailing Address 1625 Massachusetts Ave NW

City Washington State DC Zip Code 20036-2212

FEC ID number of contributing federal political committee. **C** C00035451

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  
 05 / 28 / 2014

**Transaction ID : C9361592**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**ALLERGAN INC POLITICAL ACTION COMMI**

Mailing Address 2148 E Orangeview Ln

City Orange State CA Zip Code 92867-1820

FEC ID number of contributing federal political committee. **C** C00292102

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  
 05 / 22 / 2014

**Transaction ID : C9359137**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**ALLIANT TECHSYSTEMS INC**

Mailing Address 1300 WILSON BLVD  
SUITE 400

City ROSSLYN State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00250209

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  
 06 / 17 / 2014

**Transaction ID : C9853572**

Amount of Each Receipt this Period  
 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 83 OF 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN ACADEMY OF DERMATOLOGY PAC**

Mailing Address 1445 NEW YORK AVENUE NW  
STE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
11500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : C9361567**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN ACADEMY OF NEUROLOGY BRAINPAC**

Mailing Address 509B 2ND ST NE  
LOWER LEVEL

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00435933

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : C9853574**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)**

Mailing Address 777 6TH STREET, NW  
SUITE 200

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : C9857238**

Amount of Each Receipt this Period  
2000.00

**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 84 OF 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF NURSE PRACT**

Mailing Address **PO BOX 12846**

City **AUSTIN** State **TX** Zip Code **78711**

FEC ID number of contributing federal political committee. **C C00358903**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 31 / 2014**

**Transaction ID : C9362350**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF NURSE PRACT**

Mailing Address **PO BOX 12846**

City **AUSTIN** State **TX** Zip Code **78711**

FEC ID number of contributing federal political committee. **C C00358903**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 10 / 2014**

**Transaction ID : C9853578**

Amount of Each Receipt this Period  
**1500.00**

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIATION PAC**

Mailing Address **20 F St NW**  
**ATTN: SARA MORSE**

City **Washington** State **DC** Zip Code **20001-6700**

FEC ID number of contributing federal political committee. **C C00382424**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : C10099708**

Amount of Each Receipt this Period  
**1000.00**

**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 85 OF 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN FEDERATION GOVERNMENT EMPL**

Mailing Address 80 F STREET, NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00009936

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : C9361574**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN GASTROENTEROLOGICAL ASSOCI**

Mailing Address 4720 MONTGOMERY LANE  
SUITE 430

City BETHESDA State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00423228

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : C9357248**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN HOSPITAL ASSOCIATION PAC**

Mailing Address 325 SEVENTH STREET, NW  
SUITE 700

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : C9853571**

Amount of Each Receipt this Period  
1000.00

**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 86 OF 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 25 MASSACHUSETTS AVE, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : C9359128**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 25 MASSACHUSETTS AVE, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : C9853981**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN OCCUPATIONAL THERAPY ASSOC**

Mailing Address 4720 MONTGOMERY LANE, SUITE 200

City BETHESDA State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00089086

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : C9857247**

Amount of Each Receipt this Period  
2500.00

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 87 OF 143  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN PODIATRIC MEDICAL ASSOCIAT**

Mailing Address 9312 Old Georgetown Rd

City State Zip Code  
Bethesda MD 20814-1621

FEC ID number of contributing federal political committee. **C** C00008839

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 Y Y  
 06 / 06 / 2014

**Transaction ID : C9853576**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN PSYCHIATRIC ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1000 WILSON BOULEVARD  
SUITE 1825

City State Zip Code  
ARLINGTON VA 22209

FEC ID number of contributing federal political committee. **C** C00373696

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 Y Y  
 06 / 02 / 2014

**Transaction ID : C9398095**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION PAC**

Mailing Address 2200 Research Blvd

City State Zip Code  
Rockville MD 20850-3289

FEC ID number of contributing federal political committee. **C** C00210666

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 Y Y  
 05 / 31 / 2014

**Transaction ID : C9362349**

Amount of Each Receipt this Period  
 2000.00

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 88 OF 143  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN VETERINARY MEDICAL ASSOC P**

Mailing Address 1910 Sunderland PI NW

City Washington State DC Zip Code 20036-1608

FEC ID number of contributing federal political committee. **C C00114132**

Name of Employer Occupation

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  
 06 / 23 / 2014

**Transaction ID : C9857243**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (ABC PAC)**

Mailing Address 1300 MORRIS DRIVE  
SUITE 100

City CHESTERBROOK State PA Zip Code 19355

FEC ID number of contributing federal political committee. **C C00400929**

Name of Employer Occupation

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  
 05 / 22 / 2014

**Transaction ID : C9359133**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**ANNA ESHOO FOR CONGRESS**

Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO State CA Zip Code 95814

FEC ID number of contributing federal political committee. **C C00258475**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : C9359125**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

**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 89 OF 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**ANNA ESHOO FOR CONGRESS**

Mailing Address 555 CAPITOL MALL, SUITE 1425

City State Zip Code  
SACRAMENTO CA 95814

FEC ID number of contributing federal political committee. **C C00258475**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2014

**Transaction ID : C9853584**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Barbara Lee for Congress**

Mailing Address 449 FIFTEENTH STREET  
SUITE 403

City State Zip Code  
OAKLAND CA 94612

FEC ID number of contributing federal political committee. **C C00331769**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2014

**Transaction ID : C9359258**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)**

Mailing Address P.O. BOX 961039

City State Zip Code  
FORT WORTH TX 76161

FEC ID number of contributing federal political committee. **C C00235739**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 20 / 2014

**Transaction ID : C9358289**

Amount of Each Receipt this Period  
2000.00

**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 90 OF 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**BRIDGE PAC**

Mailing Address **817 NINTH AVENUE, SECOND FLOOR**  
**PO BOX 1021**

City **MENOMINEE** State **MI** Zip Code **49858**

FEC ID number of contributing federal political committee. **C C00428045**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 03 / 2014**

**Transaction ID : C9398203**

Amount of Each Receipt this Period  
**5000.00**

**B.** Full Name (Last, First, Middle Initial)  
**BROTHERHOOD OF LOCOMOTIVE ENGINEERS**

Mailing Address **1370 ONTARIO ST**

City **CLEVELAND** State **OH** Zip Code **44113**

FEC ID number of contributing federal political committee. **C C00099234**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**6000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : C9853573**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Calpine Corporation PAC**

Mailing Address **4160 DUBLIN BLVD., SUITE 100**

City **DUBLIN** State **CA** Zip Code **94568**

FEC ID number of contributing federal political committee. **C C00362640**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 22 / 2014**

**Transaction ID : C9359138**

Amount of Each Receipt this Period  
**1000.00**

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

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

**8500.00**

**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 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**CLARKE FOR CONGRESS**

Mailing Address 111-36 200TH. STREET

City State Zip Code  
HOLLIS NY 11412

FEC ID number of contributing federal political committee. **C** C00415331

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  
 06 / 30 / 2014

**Transaction ID : C9857470**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION PAC**

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

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  
 05 / 21 / 2014

**Transaction ID : C9359121**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CAR**

Mailing Address 100 INDIANA AVE., N. W.

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00023580

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  
 05 / 21 / 2014

**Transaction ID : C9359122**

Amount of Each Receipt this Period  
 2500.00

**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 92 OF 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**CONTINENTAL AIRLINES INC EMPLOYEE FUND FOR A BETTER AMERICA PAC**

Mailing Address 1600 SMITH STREET  
SUITE HQSGV-19TH FLOOR

City HOUSTON State TX Zip Code 77002

FEC ID number of contributing federal political committee. **C C00101766**

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  
 05 / 22 / 2014

**Transaction ID : C9359165**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**COX ENTERPRISES PAC**

Mailing Address 975 F St NW  
Ste 300

City Washington State DC Zip Code 20004-1459

FEC ID number of contributing federal political committee. **C C00477653**

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  
 06 / 01 / 2014

**Transaction ID : C9398124**

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**CREE INC PAC (CREE PAC)**

Mailing Address 4600 SILICON DRIVE

City DURHAM State NC Zip Code 27703

FEC ID number of contributing federal political committee. **C C00499665**

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  
 06 / 10 / 2014

**Transaction ID : C9853581**

Amount of Each Receipt this Period  
 1000.00

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

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

7000.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

A. Full Name (Last, First, Middle Initial)  
**CTIA - THE WIRELESS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address **1400 16TH STREET NW  
SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00262295**

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  
**05 / 22 / 2014**

**Transaction ID : C9359167**

Amount of Each Receipt this Period  
**1000.00**

B. Full Name (Last, First, Middle Initial)  
**DEBBIE WASSERMAN SCHULTZ FOR CONGRE**

Mailing Address **1071 TWIN BRANCH LN**

City **WESTON** State **FL** Zip Code **33326**

FEC ID number of contributing federal political committee. **C C00385773**

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  
**05 / 31 / 2014**

**Transaction ID : C9362346**

Amount of Each Receipt this Period  
**2000.00**

C. Full Name (Last, First, Middle Initial)  
**DIANA DeGETTE FOR CONGRESS INC.**

Mailing Address **PO Box 61337**

City **Denver** State **CO** Zip Code **80206-8337**

FEC ID number of contributing federal political committee. **C C00311639**

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  
**06 / 18 / 2014**

**Transaction ID : C9857257**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4000.00**

**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 143
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A. EMPLOYEES OF NORTHROP GRUMMAN PAC**

Full Name (Last, First, Middle Initial)  
EMPLOYEES OF NORTHROP GRUMMAN PAC

Mailing Address 2980 FAIRVIEW PARK DRIVE

City State Zip Code  
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 06 / 2014

**Transaction ID : C9853575**

Amount of Each Receipt this Period  
1500.00

**B. ENGEL FOR CONGRESS PRIMARY**

Full Name (Last, First, Middle Initial)  
ENGEL FOR CONGRESS PRIMARY

Mailing Address 462 California Rd

City State Zip Code  
Bronxville NY 10708-2306

FEC ID number of contributing federal political committee. **C** C00236513

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 20 / 2014

**Transaction ID : C9857258**

Amount of Each Receipt this Period  
1000.00

**C. Facebook PAC**

Full Name (Last, First, Middle Initial)  
Facebook PAC

Mailing Address 1155 F St. NW, Suite 475

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00502906

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 19 / 2014

**Transaction ID : C9853982**

Amount of Each Receipt this Period  
1000.00

**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 95 OF 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF FARR**

Mailing Address 555 CAPITOL MALL, SUITE 1425

City State Zip Code  
SACRAMENTO CA 95814

FEC ID number of contributing federal political committee. **C** C00290429

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : C9359170**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF ROSA DeLAURO**

Mailing Address 129 CHURCH ST, STE 818

City State Zip Code  
NEW HAVEN CT 06510

FEC ID number of contributing federal political committee. **C** C00238865

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : C10099767**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**GENENTECH INC PAC**

Mailing Address 1 DNA WAY

City State Zip Code  
SO. SAN FRANCISCO CA 94080

FEC ID number of contributing federal political committee. **C** C00199257

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : C9359257**

Amount of Each Receipt this Period  
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 96 OF 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A. GENERAL ELECTRIC COMPANY PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1299 Pennsylvania Ave NW  
 Ste 900  
 City Washington State DC Zip Code 20004-2414  
 FEC ID number of contributing federal political committee. **C** C00492223  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014  
**Transaction ID : C9857227**  
 Amount of Each Receipt this Period  
 1000.00

**B. GENWORTH FINANCIAL POLITICAL ACTION**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6620 W Broad St  
 City Richmond State VA Zip Code 23230-1716  
 FEC ID number of contributing federal political committee. **C** C00404194  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014  
**Transaction ID : C9857226**  
 Amount of Each Receipt this Period  
 1000.00

**C. GOOGLE NETPAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 New York Ave NW  
 FI 2  
 City Washington State DC Zip Code 20005-4344  
 FEC ID number of contributing federal political committee. **C** C00428623  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014  
**Transaction ID : C9359131**  
 Amount of Each Receipt this Period  
 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 97 OF 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL A**

Mailing Address 101 Constitution Ave NW  
WEST

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : C9362341**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**HUMAN RIGHTS CAMPAIGN PAC**

Mailing Address 1640 RHODE ISLAND AVE NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00235853**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : C9857242**

Amount of Each Receipt this Period  
3000.00

**C.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL BROTHERHOOD OF BOILERMAKERS IRON SHIP BUILDERS BLACKSMITHS FORGERS & HELPERS

Mailing Address 753 STATE AVENUE SUITE 565

City KANSAS CITY State KS Zip Code 66101

FEC ID number of contributing federal political committee. **C C70002506**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : C9398115**

Amount of Each Receipt this Period  
1000.00

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 98 OF 143  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial)  
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL COMM

**A.** Mailing Address 7234 PARKWAY DRIVE

City State Zip Code  
HANOVER MD 21076

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : C9398104**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**Jared Polis Victory Fund**

**B.** Mailing Address PO Box 1174

City State Zip Code  
Springfield VA 22151-0174

FEC ID number of contributing federal political committee. **C** C00501825

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10099768**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**LEADERSHIP FOR TODAY AND TOMORROW**

**C.** Mailing Address 700 13TH STREET, NW  
SUITE 600

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00299149

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : C9359259**

Amount of Each Receipt this Period  
1000.00

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

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

7000.00

**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 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**LEADERSHIP FOR TODAY AND TOMORROW**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00299149

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : C9853570**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**LEADERSHIP OPPORTUNITY INNOVATION SERVICE PAC - LOIS PAC**

Mailing Address 1050 17TH ST NW STE 590

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00545137

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : C9398181**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**LEADERSHIP RESPONSIBILITY AND ACTION PAC AKA LRA PAC**

Mailing Address 6 E STREET SE

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00530774

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : C9359171**

Amount of Each Receipt this Period  
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**

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**LOFGREN FOR CONGRESS**

Mailing Address **C/O CONTRIBUTION SOLUTIONS, LLC**  
**123 E. SAN CARLOS ST., #531**

City **SAN JOSE** State **CA** Zip Code **95112**

FEC ID number of contributing federal political committee. **C C00289603**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 22 / 2014**

**Transaction ID : C9359172**

Amount of Each Receipt this Period  
**2000.00**

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLERS ASS**

Mailing Address **1325 MASSACHUSETTS AVE., NW**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00238725**

Name of Employer Occupation

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  
**05 / 22 / 2014**

**Transaction ID : C9359127**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF CHAIN DRUG**

Mailing Address **413 N. LEE STREET**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00022368**

Name of Employer Occupation

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  
**06 / 01 / 2014**

**Transaction ID : C9398128**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4000.00**

**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 143	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALERS ASSOCIATI**

Mailing Address 1101 King St  
Ste 600

City Alexandria State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 21 / 2014

**Transaction ID : C9359123**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL CABLE & TELECOMMUNICATIONS**

Mailing Address 25 Massachusetts Ave NW  
Ste 100

City Washington State DC Zip Code 20001-1434

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 23 / 2014

**Transaction ID : C9857248**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC**

Mailing Address 100 DAINGERFIELD ROAD

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

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  
05 / 22 / 2014

**Transaction ID : C9359136**

Amount of Each Receipt this Period  
1000.00

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

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

8500.00

**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 102 OF 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL EDUCATION ASSOCIATION**

Mailing Address 1201 16TH STREET NW

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C70000492

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : C9359256**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL EDUCATION ASSOCIATION**

Mailing Address 1201 16TH STREET NW

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C70000492

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 01 / 2014

**Transaction ID : C9398120**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**New York Jobs PAC**

Mailing Address PO Box 763  
DEER PARK

City State Zip Code  
Deer Park NY 11729-0763

FEC ID number of contributing federal political committee. **C** C00413716

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 31 / 2014

**Transaction ID : C9362345**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

**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 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**PACIFIC LIFE INSURANCE CO. PAC**

Mailing Address **700 NEWPORT CENTER DRIVE**

City **NEWPORT BEACH** State **CA** Zip Code **92660**

FEC ID number of contributing federal political committee. **C C00068528**

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 Y Y  
**05 / 20 / 2014**

**Transaction ID : C9358290**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**PENINSULA PAC**

Mailing Address **555 CAPITOL MALL, SUITE 1425**

City **SACRAMENTO** State **CA** Zip Code **95814**

FEC ID number of contributing federal political committee. **C C00557850**

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 Y Y  
**06 / 10 / 2014**

**Transaction ID : C9853582**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**2600.00**

**C.** Full Name (Last, First, Middle Initial)  
**PEOPLE FOR DEREK KILMER**

Mailing Address **PO BOX 1574**

City **GIG HARBOR** State **WA** Zip Code **98335**

FEC ID number of contributing federal political committee. **C C00514893**

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 Y Y  
**05 / 29 / 2014**

**Transaction ID : C9361573**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**1000.00**

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

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

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**4600.00**

**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 104 OF 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**PROFESSIONAL AVIATION SAFETY SPECIA**

Mailing Address 1150 17TH STREET NW  
SUITE 702

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00286807

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : C9359173**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**PUGET PAC**

Mailing Address 410 1ST ST SE SUITE 310

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00551168

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2014

**Transaction ID : C9853583**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**RITE AID CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 30 HUNTER LANE

City CAMP HILL State PA Zip Code 17011

FEC ID number of contributing federal political committee. **C** C00104083

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2014

**Transaction ID : C9853580**

Amount of Each Receipt this Period  
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**

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

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**SIEMENS CORPORATION PAC**

Mailing Address 300 NEW JERSEY AVENUE, NW  
SUITE 1000

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00353797

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 Y  
 05 / 28 / 2014

**Transaction ID : C9361569**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**SUNKIST GROWERS INC. PAC**

Mailing Address 14130 RIVERSIDE DR

City SHERMAN OAKS State CA Zip Code 91413

FEC ID number of contributing federal political committee. **C** C00099002

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 Y  
 06 / 05 / 2014

**Transaction ID : C9853577**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Synergy PAC**

Mailing Address 6849 OLD DOMINION DRIVE  
SUITE 222

City MCLEAN State VA Zip Code 22101

FEC ID number of contributing federal political committee. **C** C00409623

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 Y  
 06 / 17 / 2014

**Transaction ID : C9853569**

Amount of Each Receipt this Period  
 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**

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

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**UAW-V-CAP**

Mailing Address 8000 E Jefferson Ave  
# Detroit

City State Zip Code  
Detroit MI 48214-3963

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 27 / 2014

**Transaction ID : C10099707**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**UTC Employee PAC**

Mailing Address 1101 PENNSYLVANIA AVE, NW  
10TH FLOOR

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 01 / 2014

**Transaction ID : C9398129**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**VICTORY NOW PAC**

Mailing Address 10537 Saint Paul St

City State Zip Code  
Kensington MD 20895-2625

FEC ID number of contributing federal political committee. **C** C00416743

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 31 / 2014

**Transaction ID : C9362347**

Amount of Each Receipt this Period  
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

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

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**VINEPAC**

Mailing Address 700 13th St NW  
Ste 600

City Washington State DC Zip Code 20005-3960

FEC ID number of contributing federal political committee. **C C00378695**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : C9359124**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**WINE AND SPIRITS WOLESALERS OF AM P**

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00147173**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : C9358288**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**WINE INSTITUTE PAC**

Mailing Address 700 13th St NW  
Ste 600

City Washington State DC Zip Code 20005-3960

FEC ID number of contributing federal political committee. **C C00065219**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : C9359130**

Amount of Each Receipt this Period  
1000.00

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

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

5000.00

**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 108 OF 143
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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Yahoo! Inc. PAC**

Mailing Address 101 Constitution Ave NW  
WEST

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00380535**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C9857234**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**DEMOCRATIC CANDIDATE FUND (AKA THOMAS P O'NEILL, JR CONGRESS FUND)**

Mailing Address 1310 19TH STREET NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00018135**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
150.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C9857254A**

Amount of Each Receipt this Period  
150.00

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 S Capitol St SE  
FI 2

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C C00000935**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C9857254AB**

Amount of Each Receipt this Period  
150.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**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 109 OF 143
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**EDPAC**

Mailing Address 499 SOUTH CAPITOL ST SW SUITE 422

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00467837**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : C9857256A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 S Capitol St SE  
FI 2

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C C00000935**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : C9857256AB**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL EDUCATION ASSOCIATION**

Mailing Address 1201 16TH STREET NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C70000492**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : C10099709A**

Amount of Each Receipt this Period  
5000.00

\* Earmarked Contribution: See Below

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

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

6000.00

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

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 S Capitol St SE  
FI 2

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : C10099709AB**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**SHORE PAC**

Mailing Address P.O. BOX 3157

City LONG BRANCH State NJ Zip Code 07740

FEC ID number of contributing federal political committee. **C** C00410308

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2014

**Transaction ID : C9398183A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**LEADERSHIP OPPORTUNITY INNOVATION SERVICE PAC - LOIS PAC**

Mailing Address 1050 17TH ST NW STE 590

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00545137

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2014

**Transaction ID : C9398183AB**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

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

1000.00

125250.00

**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 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**San Luis Obispo County Clerk**

Mailing Address 1055 Monterey St  
Rm D120

City San Luis Obispo State CA Zip Code 93408-1003

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2009.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 12 / 2014**

**Transaction ID : C9853564**

Amount of Each Receipt this Period  
**183.51**

**B.** Full Name (Last, First, Middle Initial)  
**Santa Barbara County Elections**

Mailing Address 1100 Anacapa St

City Santa Barbara State CA Zip Code 93101-2099

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10613.50**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : C9857218**

Amount of Each Receipt this Period  
**5681.83**

**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).....

**5865.34**

**5865.34**

**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 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Jennifer L. Severance</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 10 / 2014
Mailing Address 1718 N Harrison Blvd		<b>Transaction ID : C9853566</b>
City Boise	State ID ID	
Zip Code 83702-1014	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00
Name of Employer Information Requested	Occupation Information Requested	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 1425.00		

Full Name (Last, First, Middle Initial) <b>B. Jennifer L. Severance</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2014
Mailing Address 1718 N Harrison Blvd		<b>Transaction ID : C9857211</b>
City Boise	State ID ID	
Zip Code 83702-1014	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 75.00
Name of Employer Information Requested	Occupation Information Requested	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 1425.00		

Full Name (Last, First, Middle Initial) <b>C. Union Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 30 / 2014
Mailing Address 20 E Carrillo St		<b>Transaction ID : C10100372</b>
City Santa Barbara	State ID CA	
Zip Code 93101-2707	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 69.96
Name of Employer Information Requested	Occupation Information Requested	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 47282.92		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	294.96
<b>TOTAL</b> 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 113 OF 143
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

**A.** Full Name (Last, First, Middle Initial)  
**Union Bank**

Mailing Address **20 E Carrillo St**

City **Santa Barbara** State **CA** Zip Code **93101-2707**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
**47282.92**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**06 / 30 / 2014**

**Transaction ID : C10100371**

Amount of Each Receipt this Period  
**72.32**

**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

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

Amount of Each Receipt this Period  
\_\_\_\_\_

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

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

**72.32**

**367.28**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Vender Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 7.31 <b>Transaction ID : D539450</b>
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement contribution processing fee	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>B. ActBlue Vender Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 9.74 <b>Transaction ID : D539452</b>
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement contribution processing fee	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>c. ActBlue Vender Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 7.77 <b>Transaction ID : D540029</b>
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement contribution processing fee	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	24.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Vender Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 37.02
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement contribution processing fee	Transaction ID : D540030
Candidate Name	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>B. ActBlue Vender Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 10.15
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement contribution processing fee	Transaction ID : D540031
Candidate Name	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>c. ActBlue Vender Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 0.16
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement contribution processing fee	Transaction ID : D540032
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	47.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Vender Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 1.74 <b>Transaction ID : D541018</b>
City Cambridge	State MA	
Purpose of Disbursement contribution processing fee		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>B. ActBlue Vender Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 258.21 <b>Transaction ID : D541019</b>
City Cambridge	State MA	
Purpose of Disbursement contribution processing fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address PO Box 78110		Amount of Each Disbursement this Period 161.97 <b>Transaction ID : D540619</b>
City Phoenix	State AZ	
Purpose of Disbursement office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	421.92
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 143	
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Blue Rooster Telecom</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address PO Box 4959		Amount of Each Disbursement this Period 255.04
City San Luis Obispo	State CA	
Zip Code 93403-4959	Purpose of Disbursement utilities	Transaction ID : D540599
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. C&amp;I Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address P.O. Box 20053		Amount of Each Disbursement this Period 13000.00
City Santa Barbara	State CA	
Zip Code 93120	Purpose of Disbursement fundraising consulting	Transaction ID : D540566
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" 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>c. Lois G. Capps</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1724 Santa Barbara St		Amount of Each Disbursement this Period 152.29
City Santa Barbara	State CA	
Zip Code 93101-1025	Purpose of Disbursement travel reimbursement	Transaction ID : D540650
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13407.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 143	
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Carrick Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 2866 Belden Dr		Amount of Each Disbursement this Period 70000.00 <b>Transaction ID : D538487</b>
City Los Angeles	State CA	
Zip Code 90068-1902	Purpose of Disbursement ad buy	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Costco</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address Calle Real Marketplace		Amount of Each Disbursement this Period 282.39 <b>Transaction ID : D540581</b>
City Goleta	State CA	
Zip Code 93117	Purpose of Disbursement volunteer refreshments	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>C. Costco</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address Calle Real Marketplace		Amount of Each Disbursement this Period 370.39 <b>Transaction ID : D540630</b>
City Goleta	State CA	
Zip Code 93117	Purpose of Disbursement volunteer refreshments	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	70652.78
<b>TOTAL</b> 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 143			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Mollie Culver</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 814 W Figueroa St # C		Amount of Each Disbursement this Period 10500.00 <b>Transaction ID : D540589</b>
City Santa Barbara State CA Zip Code 93101-4881	Purpose of Disbursement management consulting	
Candidate Name	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>B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 430 S Capitol St SE FI 2		Amount of Each Disbursement this Period 31.20 <b>Transaction ID : D538114</b>
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement in-kind event catering	
Candidate Name	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)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 430 S Capitol St SE FI 2		Amount of Each Disbursement this Period 515.20 <b>Transaction ID : D538115</b>
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement in-kind event catering	
Candidate Name	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)	* In-Kind Received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11046.40
<b>TOTAL</b> 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 143	
	<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)  
**Friends of Lois Capps**

**A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 S Capitol St SE  
FI 2

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement in-kind event catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 21 / 2014

Amount of Each Disbursement this Period: 69.00

Transaction ID : D538116

\* In-Kind Received

**B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 S Capitol St SE  
FI 2

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement in-kind event catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 24 / 2014

Amount of Each Disbursement this Period: 798.00

Transaction ID : D540024

\* In-Kind Received

**c. Erickson and Company**

Full Name (Last, First, Middle Initial)  
Mailing Address 38 Ivy St SE

City Washington State DC Zip Code 20003-4006

Purpose of Disbursement fundraising consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 01 / 2014

Amount of Each Disbursement this Period: 5817.48

Transaction ID : D540574

**SUBTOTAL** of Disbursements This Page (optional) ..... 6684.48

**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 121 OF 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. First Data</b>		M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-4799
Purpose of Disbursement contribution processing fee	Category/Type	
Candidate Name	Transaction ID : D540994	
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)		Date of Disbursement
<b>B. First Data</b>		M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-4799
Purpose of Disbursement contribution processing fee	Category/Type	
Candidate Name	Transaction ID : D540996	
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)		Date of Disbursement
<b>C. First Data</b>		M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-4799
Purpose of Disbursement contribution processing fee	Category/Type	
Candidate Name	Transaction ID : D540997	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	370.82
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. First Data</b>		M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-4799
Purpose of Disbursement contribution processing fee	Category/Type	
Candidate Name	Transaction ID : D541003	
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)		Date of Disbursement
<b>B. First Data</b>		M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-4799
Purpose of Disbursement contribution processing fee	Category/Type	
Candidate Name	Transaction ID : D541008	
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)		Date of Disbursement
<b>C. First Data</b>		M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-4799
Purpose of Disbursement contribution processing fee	Category/Type	
Candidate Name	Transaction ID : D541009	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1313.36
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Tyler Gibson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 814 W. Figueroa #C		Amount of Each Disbursement this Period 2049.96 <b>Transaction ID : D541308</b>
City Santa Barbara	State CA	
Zip Code 93101	Purpose of Disbursement payroll	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>B. Hacienda Oaks Property Management</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 1750 S Broadway Ste C		Amount of Each Disbursement this Period 1050.00 <b>Transaction ID : D540568</b>
City Santa Maria	State CA	
Zip Code 93454-7678	Purpose of Disbursement rent	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>c. Harbor Office Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 1436 De La Vina St		Amount of Each Disbursement this Period 1214.63 <b>Transaction ID : D540570</b>
City Santa Barbara	State CA	
Zip Code 93101-3042	Purpose of Disbursement copier	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4314.59
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Holmes and Holmes Insurance</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 299 N Fairview Ave FI 2		Amount of Each Disbursement this Period 906.00 <b>Transaction ID : D540601</b>
City Goleta State CA Zip Code 93117-2209	Purpose of Disbursement insurance Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. InFocus Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. Box 10726		Amount of Each Disbursement this Period 2022.76 <b>Transaction ID : D540597</b>
City Fort Worth State TX Zip Code 76114	Purpose of Disbursement voter contact Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Monica Intaglietta</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 622 Juanita Ave		Amount of Each Disbursement this Period 109.76 <b>Transaction ID : D540590</b>
City Santa Barbara State CA Zip Code 93109-1614	Purpose of Disbursement mileage reimbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3038.52
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. JSTREETPAC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2014
Mailing Address PO Box 33106		Amount of Each Disbursement this Period 12.18 <b>Transaction ID : D540025</b>
City Washington State DC Zip Code 20033-0106	Purpose of Disbursement contribution processing fee	
Candidate Name	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>B. JSTREETPAC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address PO Box 33106		Amount of Each Disbursement this Period 32.50 <b>Transaction ID : D540026</b>
City Washington State DC Zip Code 20033-0106	Purpose of Disbursement contribution processing fee	
Candidate Name	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>C. JSTREETPAC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address PO Box 33106		Amount of Each Disbursement this Period 16.25 <b>Transaction ID : D538119</b>
City Washington State DC Zip Code 20033-0106	Purpose of Disbursement contribution processing fee	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	60.93
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. JSTREETPAC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address PO Box 33106		Amount of Each Disbursement this Period 48.75 <b>Transaction ID : D540610</b>
City Washington	State DC	
Zip Code 20033-0106	Purpose of Disbursement contribution processing fee	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>B. Kadlubek Family Trust</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 886 Supreme Ct		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : D540567</b>
City Las Cruces	State NM	
Zip Code 88007	Purpose of Disbursement rent	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>c. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 2320 N Rose Ave		Amount of Each Disbursement this Period 245.43 <b>Transaction ID : D540620</b>
City Oxnard	State CA	
Zip Code 93036-2628	Purpose of Disbursement office supplies	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3294.18
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 5280 Valentine Rd Ste 120		Amount of Each Disbursement this Period 144.95
City Ventura	State CA	
Zip Code 93003-7338	Purpose of Disbursement payroll processing	Transaction ID : D540989
Candidate Name	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>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 5280 Valentine Rd Ste 120		Amount of Each Disbursement this Period 3568.89
City Ventura	State CA	
Zip Code 93003-7338	Purpose of Disbursement payroll taxes	Transaction ID : D538489
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Precision Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 12455 Branford St Ste 11		Amount of Each Disbursement this Period 4754.14
City Pacoima	State CA	
Zip Code 91331-3464	Purpose of Disbursement printing	Transaction ID : D540572
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8467.98
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Ralph's</b>			Date of Disbursement M M / D D / Y Y Y Y <b>06 / 13 / 2014</b>
Mailing Address 100 W Carrillo St			Amount of Each Disbursement this Period <b>96.00</b>
City Santa Barbara	State CA	Zip Code 93101-3215	
Purpose of Disbursement volunteer refreshments		Category/ Type	<b>Transaction ID : D540615</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Erica Reyes</b>			Date of Disbursement M M / D D / Y Y Y Y <b>06 / 13 / 2014</b>
Mailing Address 662 Osos St Apt C			Amount of Each Disbursement this Period <b>553.75</b>
City San Luis Obispo	State CA	Zip Code 93401	
Purpose of Disbursement travel reimbursement		Category/ Type	<b>Transaction ID : D540622</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Erica Reyes</b>			Date of Disbursement M M / D D / Y Y Y Y <b>06 / 01 / 2014</b>
Mailing Address 662 Osos St Apt C			Amount of Each Disbursement this Period <b>347.96</b>
City San Luis Obispo	State CA	Zip Code 93401	
Purpose of Disbursement travel reimbursement		Category/ Type	<b>Transaction ID : D540577</b>
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>997.71</b>
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Erica Reyes</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 662 Osos St Apt C		Amount of Each Disbursement this Period 3114.70 <b>Transaction ID : D541309</b>
City San Luis Obispo State CA Zip Code 93401	Purpose of Disbursement payroll	
Candidate Name	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>B. Riley's Flowers</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 1106 Chapala St		Amount of Each Disbursement this Period 70.20 <b>Transaction ID : D540587</b>
City Santa Barbara State CA Zip Code 93101-3112	Purpose of Disbursement flowers	
Candidate Name	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>C. Derwin Ross</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1601 18th Street NW #1006		Amount of Each Disbursement this Period 96.00 <b>Transaction ID : D540598</b>
City Washington State DC Zip Code 20009	Purpose of Disbursement event help	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3280.90
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. SLOPCC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 750 Pismo Street		Amount of Each Disbursement this Period 1100.00 <b>Transaction ID : D540569</b>
City San Luis Obispo	State CA	
Zip Code 93401	Purpose of Disbursement rent	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>B. Smart and Final</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 300 E Gutierrez St		Amount of Each Disbursement this Period 41.69 <b>Transaction ID : D540582</b>
City Santa Barbara	State CA	
Zip Code 93101-1773	Purpose of Disbursement volunteer refreshments	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>c. Smart and Final</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 300 E Gutierrez St		Amount of Each Disbursement this Period 42.38 <b>Transaction ID : D540627</b>
City Santa Barbara	State CA	
Zip Code 93101-1773	Purpose of Disbursement volunteer refreshments	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1184.07
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address PO Box 9020		Amount of Each Disbursement this Period 10.78
City Des Moines	State IA	
Zip Code 50368	Purpose of Disbursement office supplies	Transaction ID : D540648
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Union Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 20 E Carrillo St		Amount of Each Disbursement this Period 25.00
City Santa Barbara	State CA	
Zip Code 93101-2707	Purpose of Disbursement bank fee	Transaction ID : D538488
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Union Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 20 E Carrillo St		Amount of Each Disbursement this Period 15.00
City Santa Barbara	State CA	
Zip Code 93101-2707	Purpose of Disbursement bank fee	Transaction ID : D540993
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	50.78
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. US Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 800 Anacapa St		Amount of Each Disbursement this Period 4.90 Transaction ID : D540637
City Santa Barbara	State CA	
Zip Code 93101-2212	Purpose of Disbursement postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Verizon CA</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address PO Box 30001		Amount of Each Disbursement this Period 44.34 Transaction ID : D540652
City Inglewood	State CA	
Zip Code 90313	Purpose of Disbursement utilities	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Verizon CA</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address PO Box 30001		Amount of Each Disbursement this Period 47.18 Transaction ID : D540564
City Inglewood	State CA	
Zip Code 90313	Purpose of Disbursement utilities	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	96.42
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Verizon CA</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address PO Box 30001		Amount of Each Disbursement this Period 3486.58 <b>Transaction ID : D541029</b>
City Inglewood	State CA	
Zip Code 90313	Purpose of Disbursement utilities	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>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address PO Box 4001		Amount of Each Disbursement this Period 215.13 <b>Transaction ID : D540588</b>
City Inglewood	State CA	
Zip Code 90309-4001	Purpose of Disbursement utilities	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>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 5280 Valentine Rd Ste 120		Amount of Each Disbursement this Period 3114.69 <b>Transaction ID : D538492</b>
City Ventura	State CA	
Zip Code 93003-7338	Purpose of Disbursement payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3486.58
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. James Wittrock</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 130 1/2 E Canon Perdido St		Amount of Each Disbursement this Period 3114.69
City Santa Barbara	State CA	
Zip Code 93101-7217	Purpose of Disbursement payroll	Transaction ID : D538493
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jennifer Cooper</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 1333 Tomol St		Amount of Each Disbursement this Period 967.21
City Carpinteria	State CA	
Zip Code 93013-1716	Purpose of Disbursement reimbursement	Transaction ID : D540560
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" 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>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address PO Box 9020		Amount of Each Disbursement this Period 27.21
City Des Moines	State IA	
Zip Code 50368	Purpose of Disbursement office supplies	Transaction ID : D540563
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	967.21
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. US Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 800 Anacapa St		Amount of Each Disbursement this Period 940.00
City Santa Barbara	State CA	
Zip Code 93101-2212	Purpose of Disbursement postage	Transaction ID : D540562
Candidate Name	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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. C&amp;I Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address P.O. Box 20053		Amount of Each Disbursement this Period 83.90
City Santa Barbara	State CA	
Zip Code 93120	Purpose of Disbursement reimbursement	Transaction ID : D540575
Candidate Name	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>C. Cox Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address PO Box 6058		Amount of Each Disbursement this Period 83.90
City Cypress	State CA	
Zip Code 90630-0058	Purpose of Disbursement utilities	Transaction ID : D540576
Candidate Name	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)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	83.90
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Monica Intaglietta</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 01 / 2014</b>
Mailing Address <b>622 Juanita Ave</b>		Amount of Each Disbursement this Period <b>72.30</b>
City <b>Santa Barbara</b> State <b>CA</b> Zip Code <b>93109-1614</b>	Purpose of Disbursement <b>reimbursement</b>	
Candidate Name	Category/Type	<b>Transaction ID : D540591</b>
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>B. Starbucks</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 01 / 2014</b>
Mailing Address <b>800 State St</b>		Amount of Each Disbursement this Period <b>32.30</b>
City <b>Santa Barbara</b> State <b>CA</b> Zip Code <b>93101-3207</b>	Purpose of Disbursement <b>volunteer refreshments</b>	
Candidate Name	Category/Type	<b>Transaction ID : D540594</b> <b>[MEMO ITEM]</b>
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>c. Von's</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 01 / 2014</b>
Mailing Address <b>3855 State St</b>		Amount of Each Disbursement this Period <b>5.00</b>
City <b>Santa Barbara</b> State <b>CA</b> Zip Code <b>93105-3152</b>	Purpose of Disbursement <b>volunteer refreshments</b>	
Candidate Name	Category/Type	<b>Transaction ID : D540595</b> <b>[MEMO ITEM]</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>72.30</b>
<b>TOTAL</b> 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 143			
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Jennifer Cooper</b>			Date of Disbursement MM / DD / YYYY 06 / 13 / 2014		
Mailing Address 1333 Tomol St			Amount of Each Disbursement this Period 3027.28		
City Carpinteria	State CA	Zip Code 93013-1716	Transaction ID : D540602		
Purpose of Disbursement reimbursement		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Google</b>			Date of Disbursement MM / DD / YYYY 06 / 13 / 2014		
Mailing Address 1600 Amphitheatre Parkway			Amount of Each Disbursement this Period 35.33		
City Mountain View	State CA	Zip Code 94043	Transaction ID : D540603		
Purpose of Disbursement web expense		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Ralph's</b>			Date of Disbursement MM / DD / YYYY 06 / 13 / 2014		
Mailing Address 100 W Carrillo St			Amount of Each Disbursement this Period 130.16		
City Santa Barbara	State CA	Zip Code 93101-3215	Transaction ID : D540609		
Purpose of Disbursement volunteer refreshments		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3027.28
<b>TOTAL</b> 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 143	
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial)  
**A. Staples**

Mailing Address PO Box 9020

City Des Moines State IA Zip Code 50368

Purpose of Disbursement office supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 13 / 2014

Amount of Each Disbursement this Period: 33.02

Transaction ID : D540604

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. Subway**

Mailing Address 2817 Compass Cir

City Woodbridge State VA Zip Code 22191-6055

Purpose of Disbursement volunteer refreshments

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 13 / 2014

Amount of Each Disbursement this Period: 70.00

Transaction ID : D540612

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**c. US Postmaster**

Mailing Address 800 Anacapa St

City Santa Barbara State CA Zip Code 93101-2212

Purpose of Disbursement postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 13 / 2014

Amount of Each Disbursement this Period: 2597.00

Transaction ID : D540611

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

**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 139 OF 143		
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. C&amp;I Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. Box 20053		Amount of Each Disbursement this Period 83.90
City Santa Barbara	State CA	
Zip Code 93120	Purpose of Disbursement reimbursement	Transaction ID : D540653
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cox Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address PO Box 6058		Amount of Each Disbursement this Period 83.90
City Cypress	State CA	
Zip Code 90630-0058	Purpose of Disbursement utilities	Transaction ID : D540656
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Monica Intaglietta</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 622 Juanita Ave		Amount of Each Disbursement this Period 91.65
City Santa Barbara	State CA	
Zip Code 93109-1614	Purpose of Disbursement reimbursement	Transaction ID : D540660
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	175.55
<b>TOTAL</b> 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 143	
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Ralph's</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 13 / 2014</b>
Mailing Address <b>100 W Carrillo St</b>		Amount of Each Disbursement this Period <b>14.47</b>
City <b>Santa Barbara</b>	State <b>CA</b>	Zip Code <b>93101-3215</b>
Purpose of Disbursement <b>volunteer refreshments</b>		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Transaction ID : **D540662**  
**[MEMO ITEM]**

Full Name (Last, First, Middle Initial) <b>B. Starbucks</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 13 / 2014</b>
Mailing Address <b>800 State St</b>		Amount of Each Disbursement this Period <b>13.95</b>
City <b>Santa Barbara</b>	State <b>CA</b>	Zip Code <b>93101-3207</b>
Purpose of Disbursement <b>volunteer refreshments</b>		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Transaction ID : **D540665**  
**[MEMO ITEM]**

Full Name (Last, First, Middle Initial) <b>c. Subway</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 13 / 2014</b>
Mailing Address <b>2817 Compass Cir</b>		Amount of Each Disbursement this Period <b>38.00</b>
City <b>Woodbridge</b>	State <b>VA</b>	Zip Code <b>22191-6055</b>
Purpose of Disbursement <b>volunteer refreshments</b>		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Transaction ID : **D540663**  
**[MEMO ITEM]**

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>0.00</b>
<b>TOTAL</b> 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 143	
	<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)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 5280 Valentine Rd Ste 120		Amount of Each Disbursement this Period 3114.71
City Ventura	State CA	
Zip Code 93003-7338	Purpose of Disbursement payroll	Transaction ID : D540990
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. James Wittrock</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 130 1/2 E Canon Perdido St		Amount of Each Disbursement this Period 3114.71
City Santa Barbara	State CA	
Zip Code 93101-7217	Purpose of Disbursement payroll	Transaction ID : D540991
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</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	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3114.71
<b>TOTAL</b> This Period (last page this line number only).....	139682.85

**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 143			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

Full Name (Last, First, Middle Initial) <b>A. Santa Maria Vly Chamber of Commerce</b>			Date of Disbursement M M / D D / Y Y Y Y <b>06 / 01 / 2014</b>
Mailing Address <b>614 S Broadway</b>			Amount of Each Disbursement this Period <b>150.00</b>
City <b>Santa Maria</b>	State <b>CA</b>	Zip Code <b>93454-5111</b>	
Purpose of Disbursement membership contribution		Category/ Type	<b>Transaction ID : D540573</b>
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>B.</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		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>C.</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		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: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>150.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>150.00</b>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Friends of Lois Capps**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Jennifer L. Severance</b>		Nature of Debt (Purpose): Restitution for Unauth. Expenditures
Mailing Address 1718 N Harrison Blvd		
City State Boise ID	Zip Code 83702-1014	

Outstanding Balance Beginning This Period 118150.00		<b>Transaction ID : C7884389</b>	
Amount Incurred This Period 0.00	Payment This Period 225.00	Outstanding Balance at Close of This Period 117925.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	117925.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	117925.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶		117925.00