

# 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

Committee to Re-Elect Congressman Rohrabacher

ADDRESS (number and street) 170 E 17th Street #110

Check if different than previously reported. (ACC)

Costa Mesa

CA

92627

2. **FEC IDENTIFICATION NUMBER** ▼

C C00224691

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

CA

48

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jack Wu

Signature of Treasurer Jack Wu

[Electronically Filed]

Date

/  /

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Committee to Re-Elect Congressman Rohrabacher**

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)) ....	11448.29	495218.59
(b) Total Contribution Refunds (from Line 20(d)) .....	6100.00	6350.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	5348.29	488868.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	48762.63	458550.75
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	400.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	48762.63	458150.75
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	214264.30	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	19000.00	
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

**Committee to Re-Elect Congressman Rohrabacher**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11448.29	476243.59
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	11448.29	476243.59
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	18975.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	11448.29	495218.59
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	400.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	11448.29	495618.59

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	48762.63	458550.75
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 .....	6100.00	6350.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	6100.00	6350.00
21. OTHER DISBURSEMENTS .....	125.00	7897.23
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	54987.63	472797.98

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	257803.64
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	11448.29
25. SUBTOTAL (add Line 23 and Line 24).....	269251.93
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	54987.63
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	214264.30

**SCHEDULE A (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 53
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

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

Mailing Address P.O.box 3865

City Dana Point State CA Zip Code 92629

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

Name of Employer Occupation Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 15 / 2014

**Transaction ID : INCA8579**

Amount of Each Receipt this Period  
 150.00

Amount of Each Receipt this Period  
 350.00

**B.** Full Name (Last, First, Middle Initial)  
**Farrokh Ameri Ttee**

Mailing Address 33 Monaco

City Newport Beach State CA Zip Code 92660

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

Name of Employer Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : INCA8603**

Amount of Each Receipt this Period  
 200.00

Amount of Each Receipt this Period  
 1200.00

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

Mailing Address 17 5th St.

City Hemosa Beach State CA Zip Code 90254

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

Name of Employer Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : INCA8589**

Amount of Each Receipt this Period  
 250.00

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 6 OF 53
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

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

Mailing Address **PO Box 7118**

City **Capistrano Beach** State **CA** Zip Code **92624**

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

Name of Employer Info Requested \_\_\_\_\_ Occupation Info Requested \_\_\_\_\_

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

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 12 / 2014**

**Transaction ID : INCA8591**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **1143 Granville Dr.**

City **Newport Beach** State **CA** Zip Code **92660**

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

Name of Employer Info Requested \_\_\_\_\_ Occupation Info Requested \_\_\_\_\_

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

Election Cycle-to-Date **23.29**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 25 / 2014**

**Transaction ID : INCA8602**

Amount of Each Receipt this Period  
**23.29**

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

Mailing Address **24055 Paseo Del Lago W. Apt 1355**

City **Laguna Hills** State **CA** Zip Code **92637**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

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

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 23 / 2014**

**Transaction ID : INCA8584**

Amount of Each Receipt this Period  
**250.00**

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

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

**523.29**

**SCHEDULE A (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 53
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Brett M. Kingstone**

Mailing Address 8240 Exchange Drive  
Suite Cloud 9

City Orlando State FL Zip Code 32809

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

Name of Employer Supervision International Occupation Chairman

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 / 01 / 2014

**Transaction ID : INCA8674**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 9821 Fair Tide Circle

City Huntington Beach State CA Zip Code 92646

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

Name of Employer USPS Occupation Mailman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 01 / 2014

**Transaction ID : INCA8604**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 602 Kings Road

City Newport Beach State CA Zip Code 92663

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 17 / 2014

**Transaction ID : INCA8588**

Amount of Each Receipt this Period  
400.00

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

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

1425.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 53
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Anita Meister-Boyd**

Mailing Address 1 Vista Tramonto

City Newport Coast State CA Zip Code 92657

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

Name of Employer Retired Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 15 / 2014

**Transaction ID : INCA8586**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 1400.00

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

Mailing Address 20355 Amapola Ave

City Orange State CA Zip Code 92869

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

Name of Employer ORCO BLOCK CO., INC. Occupation Concrete Block Manufacturer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : INCA8587**

Amount of Each Receipt this Period  
 400.00

Amount of Each Receipt this Period  
 400.00

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

Mailing Address 16862 Baruna Lane

City Huntington Beach State CA Zip Code 92649

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

Name of Employer Nielsen Citrus Products Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : INCA8672**

Amount of Each Receipt this Period  
 450.00

Amount of Each Receipt this Period  
 650.00

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

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

1850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 53
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

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

Mailing Address 260 Cagney Ln  
#219

City Newport Beach State CA Zip Code 92663

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 10 / 2014

**Transaction ID : INCA8605**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 3552 Venture Drive

City Huntington Beach State CA Zip Code 92649

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

Name of Employer Info Requested Occupation Info Requested  
 Singer Holdings Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : INCA8590**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 26 Balboa Cove

City Newport Beach State CA Zip Code 92663

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

Name of Employer Info Requested Occupation Info Requested  
 Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 13 / 2014

**Transaction ID : INCA8673**

Amount of Each Receipt this Period  
 200.00

**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 10 OF 53
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Michelle E. Steel**

Mailing Address PO Box 472

City State Zip Code  
Surfside CA 90743

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

Name of Employer Occupation  
State Board Of Equalization Member

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3050.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 29 / 2014

**Transaction ID : INCA8597**

Amount of Each Receipt this Period  
2150.00

**B.** Full Name (Last, First, Middle Initial)  
**Michelle E. Steel**

Mailing Address PO Box 472

City State Zip Code  
Surfside CA 90743

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

Name of Employer Occupation  
State Board Of Equalization Member

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3050.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 29 / 2014

**Transaction ID : INCA8598**

Amount of Each Receipt this Period  
900.00

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

Mailing Address PO Box 472

City State Zip Code  
Surfside CA 90743

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

Name of Employer Occupation  
Shawn Steel, Esq. Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7350.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 29 / 2014

**Transaction ID : INCA8596**

Amount of Each Receipt this Period  
2600.00

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

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

5650.00

**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 53
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Shawn Steel</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 29 / 2014	
Mailing Address PO Box 472		<b>Transaction ID : INCA8595</b>	
City Surfside	State CA	Zip Code 90743	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00	
Name of Employer Shawn Steel, Esq.	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7350.00		

Full Name (Last, First, Middle Initial) <b>B. Qasim Tarin</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 02 / 2014	
Mailing Address 6553 Las Positas Rd		<b>Transaction ID : INCA8582</b>	
City Livermore	State CA	Zip Code 94551	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer Eis	Occupation President		
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>C.</b>		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	11448.29

**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 12 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. 3DNA</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 448 S. Hill St. Suite 200		Amount of Each Disbursement this Period 246.00 <b>Transaction ID : EXPB8625</b>
City Los Angeles State CA Zip Code 90013	Purpose of Disbursement Web/Online Services 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ace Hardware</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 24582 Via Carissa		Amount of Each Disbursement this Period 28.06 <b>Transaction ID : EXPB8662</b>
City Laguna Niguel State CA Zip Code 92677	Purpose of Disbursement Campaign HQ Supplies 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jonathan Adamany</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 41 Via Di Nola		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : EXPB8694</b>
City Laguna Niguel State CA Zip Code 92677	Purpose of Disbursement HQ Salary 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1274.06
<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 13 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Adobe Systems Incorporated</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 345 Park Avenue		Amount of Each Disbursement this Period 29.99
City San Jose State CA Zip Code 95110-2704	Purpose of Disbursement Web/Online Services 001 Category/Type	
Candidate Name		Transaction ID : EXPB8617
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. Adobe Systems Incorporated</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 345 Park Avenue		Amount of Each Disbursement this Period 29.99
City San Jose State CA Zip Code 95110-2704	Purpose of Disbursement Web/Online Services 001 Category/Type	
Candidate Name		Transaction ID : EXPB8658
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. Amazon.com</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 1200 12th Ave S #1200		Amount of Each Disbursement this Period 28.92
City Seattle State WA Zip Code 98144	Purpose of Disbursement Campaign HQ Supplies 001 Category/Type	
Candidate Name		Transaction ID : EXPB8632
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).....	88.90
<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 14 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Amazon.com</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 1200 12th Ave S #1200		Amount of Each Disbursement this Period 1270.04
City Seattle	State WA	
Zip Code 98144	Purpose of Disbursement Campaign HQ Supplies	<b>Transaction ID : EXPB8633</b>
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) <b>B. Amazon.com</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 1200 12th Ave S #1200		Amount of Each Disbursement this Period 91.92
City Seattle	State WA	
Zip Code 98144	Purpose of Disbursement Campaign HQ Supplies	<b>Transaction ID : EXPB8631</b>
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) <b>c. American Legion</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 24707 Dana Drive		Amount of Each Disbursement this Period 20.00
City Dana Point	State CA	
Zip Code 92629	Purpose of Disbursement Candidate Meet and Greet	<b>Transaction ID : EXPB8641</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1381.96
<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 15 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Andrew Ahn Painting Company</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 1777 W Cris Ave		Amount of Each Disbursement this Period 490.00 <b>Transaction ID : EXPB8690</b>
City Anaheim	State CA	
Zip Code 92804	Purpose of Disbursement HQ Painting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Apple Store</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 3333 Bear St #101		Amount of Each Disbursement this Period 4265.79 <b>Transaction ID : EXPB8618</b>
City Costa Mesa	State CA	
Zip Code 92626	Purpose of Disbursement Campaign Hardware	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Apple Store</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 3333 Bear St #101		Amount of Each Disbursement this Period 753.84 <b>Transaction ID : EXPB8665</b>
City Costa Mesa	State CA	
Zip Code 92626	Purpose of Disbursement Campaign Hardware	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5509.63
<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 16 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 45.06
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Phone and Internet	<b>Transaction ID : EXPB8616</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 159.73
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Phone and Internet	<b>Transaction ID : EXPB8624</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 109.68
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Phone and Internet	<b>Transaction ID : EXPB8657</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	314.47
<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 17 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Baker Party Rentals</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 1151 Baker St		Amount of Each Disbursement this Period 225.00 <b>Transaction ID : EXPB8655</b>
City Costa Mesa	State CA	
Zip Code 92626	Purpose of Disbursement Fundraising Rentals	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Baker Party Rentals</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 1151 Baker St		Amount of Each Disbursement this Period 58.00 <b>Transaction ID : EXPB8652</b>
City Costa Mesa	State CA	
Zip Code 92626	Purpose of Disbursement Fundraising Rentals	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Bank of America</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 888 7th Street		Amount of Each Disbursement this Period 45.00 <b>Transaction ID : EXPB8677</b>
City Los Angeles	State CA	
Zip Code 90017	Purpose of Disbursement Wire Transfer Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	225.00
<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 18 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 888 7th Street		Amount of Each Disbursement this Period 45.00
City Los Angeles	State CA	
Zip Code 90017	Purpose of Disbursement Wire Transfer Fee	<b>Transaction ID : EXPB8678</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 888 7th Street		Amount of Each Disbursement this Period 45.00
City Los Angeles	State CA	
Zip Code 90017	Purpose of Disbursement Wire Transfer Fee	<b>Transaction ID : EXPB8679</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Bank of America</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 888 7th Street		Amount of Each Disbursement this Period 45.00
City Los Angeles	State CA	
Zip Code 90017	Purpose of Disbursement Wire Transfer Fee	<b>Transaction ID : EXPB8707</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	135.00
<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 19 OF 53		
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Benq America</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 3200 Park Center Drive, Suite 150		Amount of Each Disbursement this Period 297.10
City Costa Mesa	State CA	
Zip Code 92626	Purpose of Disbursement Computer Monitors	Transaction ID : EXPB8675
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Benq America</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 3200 Park Center Drive, Suite 150		Amount of Each Disbursement this Period 837.00
City Costa Mesa	State CA	
Zip Code 92626	Purpose of Disbursement Computer Monitors	Transaction ID : EXPB8676
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Bluehost.Com</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 1270 Pacific Avenue		Amount of Each Disbursement this Period 59.96
City Laguna Beach	State CA	
Zip Code 92651	Purpose of Disbursement Web Host	Transaction ID : EXPB8656
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1194.06
<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 20 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014	
Mailing Address 300 1st St SE			Amount of Each Disbursement this Period 457.70	
City Washington	State DC	Zip Code 20003	Transaction ID : EXPB8621	
Purpose of Disbursement Fundraiser Food		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. DMH Meyer Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014	
Mailing Address 1560-1 Newbury Road #212			Amount of Each Disbursement this Period 5453.29	
City Newbury Park	State CA	Zip Code 91320	Transaction ID : EXPB8695	
Purpose of Disbursement Campaign Materials Printing		Category/ Type 006		
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. DMH Meyer Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014	
Mailing Address 1560-1 Newbury Road #212			Amount of Each Disbursement this Period 1343.75	
City Newbury Park	State CA	Zip Code 91320	Transaction ID : EXPB8709	
Purpose of Disbursement Campaign Materials Printing		Category/ Type 006		
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) .....	7254.74
<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 21 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Fountain Plaza</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 18633 Brookhurst St		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : EXPB8713</b>
City Fountain Valley	State CA	
Zip Code 92708	Purpose of Disbursement FV/HB HQ Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Fountain Plaza</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2014
Mailing Address 18633 Brookhurst St		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : EXPB8712</b>
City Fountain Valley	State CA	
Zip Code 92708	Purpose of Disbursement FV/HB HQ Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Gravis Marketing</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 910 Bell Avenue		Amount of Each Disbursement this Period 199.00 <b>Transaction ID : EXPB8611</b>
City Winter Springs	State FL	
Zip Code 32708	Purpose of Disbursement Polling Services	Category/ Type 005
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).....	999.00
<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 22 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Gravis Marketing</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 910 Bell Avenue		Amount of Each Disbursement this Period 300.00
City Winter Springs	State FL	
Zip Code 32708	Purpose of Disbursement Polling Services	<b>Transaction ID : EXPB8664</b>
Candidate Name	005 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. Jonvieve Grist</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 1 Tolcarne Villas		Amount of Each Disbursement this Period 500.00
City Whitmoor Cornwall	State UK	
Zip Code 267	Purpose of Disbursement Database Management	<b>Transaction ID : EXPB8680</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jonvieve Grist</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 1 Tolcarne Villas		Amount of Each Disbursement this Period 500.00
City Whitmoor Cornwall	State UK	
Zip Code 267	Purpose of Disbursement Database Management	<b>Transaction ID : EXPB8681</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1300.00
<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 23 OF 53		
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Jonvieve Grist</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 1 Tolcarne Villas		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : EXPB8682</b>
City Whitmoor Cornwall	State UK	
Zip Code 267	Purpose of Disbursement Database Management	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Jonvieve Grist</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 1 Tolcarne Villas		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : EXPB8706</b>
City Whitmoor Cornwall	State UK	
Zip Code 267	Purpose of Disbursement Database Management	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Ron Higby</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2014
Mailing Address 8932 Modesto Circle #1211B		Amount of Each Disbursement this Period 155.64 <b>Transaction ID : EXPB8708</b>
City Huntington Beach	State CA	
Zip Code 92646	Purpose of Disbursement Expenses Reimbursement	Category/ Type 007
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).....	2655.64
<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 24 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Highrise</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 30 North Racine Avenue #200		Amount of Each Disbursement this Period 49.00 <b>Transaction ID : EXPB8619</b>
City Chicago State IL Zip Code 60607	Purpose of Disbursement Online/Web Services 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Highrise</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 30 North Racine Avenue #200		Amount of Each Disbursement this Period 49.00 <b>Transaction ID : EXPB8653</b>
City Chicago State IL Zip Code 60607	Purpose of Disbursement Online/Web Services 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Hotel Irvine</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 17900 Jamboree Road		Amount of Each Disbursement this Period 8.00 <b>Transaction ID : EXPB8629</b>
City Irvine State CA Zip Code 92614	Purpose of Disbursement Parking 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	106.00
<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 25 OF 53			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Libby Huyck</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 963 Sandcastle Dr.		Amount of Each Disbursement this Period 51.20 <b>Transaction ID : EXPB8711</b>
City Corona Del Mar	State CA	
Zip Code 92625	Purpose of Disbursement Expenses Reimbursement	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Libby Huyck</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 963 Sandcastle Dr.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : EXPB8710</b>
City Corona Del Mar	State CA	
Zip Code 92625	Purpose of Disbursement HQ Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. J Shaw Co</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 3419 Via Lido 183		Amount of Each Disbursement this Period 49.00 <b>Transaction ID : EXPB8704</b>
City Newport Beach	State CA	
Zip Code 92663	Purpose of Disbursement HQ Supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	600.20
<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 26 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Sandra Larkin</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2014
Mailing Address 2706 Hillside Drive		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : EXPB8692</b>
City Newport Beach	State CA	
Zip Code 92660	Purpose of Disbursement HQ Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Sandra Larkin</b>		Date of Disbursement MM / DD / YYYY 04 / 09 / 2014
Mailing Address 2706 Hillside Drive		Amount of Each Disbursement this Period 102.39 <b>Transaction ID : EXPB8700</b>
City Newport Beach	State CA	
Zip Code 92660	Purpose of Disbursement Expenses Reimbursement	Category/ Type 007
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. Sandra Larkin</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address 2706 Hillside Drive		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : EXPB8714</b>
City Newport Beach	State CA	
Zip Code 92660	Purpose of Disbursement HQ Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1602.39
<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 27 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Sandra Larkin</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 2706 Hillside Drive		Amount of Each Disbursement this Period 99.10 <b>Transaction ID : EXPB8715</b>
City Newport Beach	State CA	
Purpose of Disbursement Expenses Reimbursement	Category/Type 007	
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. LinkedIn</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 2029 Stierlin Court		Amount of Each Disbursement this Period 49.95 <b>Transaction ID : EXPB8636</b>
City Mountain View	State CA	
Purpose of Disbursement Online/Web Services	Category/Type 004	
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. Mail Chimp</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 512 Means St Suite 404		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : EXPB8612</b>
City Atlanta	State GA	
Purpose of Disbursement Web/Online Services	Category/Type 004	
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).....	99.10
<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 28 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Mail Chimp</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 512 Means St Suite 404		Amount of Each Disbursement this Period 127.50
City Atlanta State GA Zip Code 30318	Purpose of Disbursement Web/Online Services 004 Category/Type	
Candidate Name		Transaction ID : EXPB8640
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. Mail Chimp</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 512 Means St Suite 404		Amount of Each Disbursement this Period 30.00
City Atlanta State GA Zip Code 30318	Purpose of Disbursement Web/Online Services 004 Category/Type	
Candidate Name		Transaction ID : EXPB8660
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. Map Large Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 1201 Peachtree St NE #200		Amount of Each Disbursement this Period 40.06
City Atlanta State GA Zip Code 30361	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : EXPB8637
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).....	197.56
<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 29 OF 53		
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial)  
**A. Map Large Inc**

Mailing Address 1201 Peachtree St NE #200

City Atlanta State GA Zip Code 30361

Purpose of Disbursement  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 28 / 2014

Amount of Each Disbursement this Period: 15.75

Transaction ID : EXPB8638

Full Name (Last, First, Middle Initial)  
**B. Map Large Inc**

Mailing Address 1201 Peachtree St NE #200

City Atlanta State GA Zip Code 30361

Purpose of Disbursement  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 28 / 2014

Amount of Each Disbursement this Period: 55.74

Transaction ID : EXPB8635

Full Name (Last, First, Middle Initial)  
**c. Map Large Inc**

Mailing Address 1201 Peachtree St NE #200

City Atlanta State GA Zip Code 30361

Purpose of Disbursement  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 28 / 2014

Amount of Each Disbursement this Period: 10.00

Transaction ID : EXPB8639

**SUBTOTAL** of Disbursements This Page (optional) ..... 81.49

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 53		
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Nazanin Namazi</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 29726 Felton Drive		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : EXPB8691</b>
City Laguna Niguel State CA Zip Code 92677	Purpose of Disbursement HQ Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nazanin Namazi</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 29726 Felton Drive		Amount of Each Disbursement this Period 536.43 <b>Transaction ID : EXPB8696</b>
City Laguna Niguel State CA Zip Code 92677	Purpose of Disbursement Expenses Reimbursement Candidate Name Category/Type 007	
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. Nazanin Namazi</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 29726 Felton Drive		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : EXPB8701</b>
City Laguna Niguel State CA Zip Code 92677	Purpose of Disbursement HQ Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3536.43
<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 31 OF 53			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Nazanin Namazi</b>		Date of Disbursement MM / DD / YYYY 04 / 19 / 2014
Mailing Address 29726 Felton Drive		Amount of Each Disbursement this Period 446.60 <b>Transaction ID : EXPB8703</b>
City Laguna Niguel State CA Zip Code 92677	Purpose of Disbursement Expenses Reimbursement Candidate Name Category/Type 007	
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. Nazanin Namazi</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address 29726 Felton Drive		Amount of Each Disbursement this Period 580.00 <b>Transaction ID : EXPB8717</b>
City Laguna Niguel State CA Zip Code 92677	Purpose of Disbursement Expenses Reimbursement Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Nazanin Namazi</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address 29726 Felton Drive		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : EXPB8716</b>
City Laguna Niguel State CA Zip Code 92677	Purpose of Disbursement HQ Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2526.60
<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 32 OF 53		
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Nimble</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 2043 Colorado Avenue, Suite B		Amount of Each Disbursement this Period 45.00
City Santa Monica State CA Zip Code 90404	Purpose of Disbursement Web/Online Services 001 Category/Type	
Candidate Name		<b>Transaction ID : EXPB8610</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. Nimble</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 2043 Colorado Avenue, Suite B		Amount of Each Disbursement this Period 45.00
City Santa Monica State CA Zip Code 90404	Purpose of Disbursement Web/Online Services 001 Category/Type	
Candidate Name		<b>Transaction ID : EXPB8663</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. Ning Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 285 Hamilton St.Fourth Floor		Amount of Each Disbursement this Period 524.85
City Palo Alto State CA Zip Code 94301	Purpose of Disbursement Web/Online Services 004 Category/Type	
Candidate Name		<b>Transaction ID : EXPB8628</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).....	614.85
<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 33 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Penjoyan</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2014
Mailing Address 2016 Newport Boulevard		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : EXPB8698</b>
City Costa Mesa	State CA	
Zip Code 92627	Purpose of Disbursement Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 17.00 <b>Transaction ID : EXPB8592</b>
City Austin	State CA	
Zip Code 78701	Purpose of Disbursement Credit Card Processing	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 17.00 <b>Transaction ID : EXPB8593</b>
City Austin	State CA	
Zip Code 78701	Purpose of Disbursement Credit Card Processing	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1034.00
<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 34 OF 53			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014		
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 110.50		
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8601		
Purpose of Disbursement Credit Card Processing		003 Category/Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014		
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 57.37		
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8600		
Purpose of Disbursement Credit Card Processing		003 Category/Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014		
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 91.38		
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8599		
Purpose of Disbursement Credit Card Processing		003 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).....	259.25
<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 35 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 327.00 <b>Transaction ID : EXPB8667</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Processing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Rallycongress.com</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 2200 Wilson Blvd. #102-299		Amount of Each Disbursement this Period 149.00 <b>Transaction ID : EXPB8608</b>
City Arlington State VA Zip Code 22201	Purpose of Disbursement Web/Online Services 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Rallycongress.com</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 2200 Wilson Blvd. #102-299		Amount of Each Disbursement this Period 149.00 <b>Transaction ID : EXPB8666</b>
City Arlington State VA Zip Code 22201	Purpose of Disbursement Web/Online Services 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	327.00
<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 36 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Rhonda Rohrabacher</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014	
Mailing Address 447 Costa Mesa Street			Amount of Each Disbursement this Period 2170.08	
City Costa Mesa	State CA	Zip Code 92627	Transaction ID : EXPB8372	
Purpose of Disbursement Salary		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Rhonda Rohrabacher</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014	
Mailing Address 447 Costa Mesa Street			Amount of Each Disbursement this Period 2170.09	
City Costa Mesa	State CA	Zip Code 92627	Transaction ID : EXPB8583	
Purpose of Disbursement Salary		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Rhonda Rohrabacher</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014	
Mailing Address 447 Costa Mesa Street			Amount of Each Disbursement this Period 2170.09	
City Costa Mesa	State CA	Zip Code 92627	Transaction ID : EXPB8585	
Purpose of Disbursement Salary		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6510.26
<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 37 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Sanchos Tacos</b>		Date of Disbursement MM / DD / YYYY 04 / 16 / 2014
Mailing Address 3014 W Balboa Blvd		Amount of Each Disbursement this Period 52.49
City Newport Beach	State CA	
Zip Code 92663	Purpose of Disbursement Volunteer Food	<b>Transaction ID : EXPB8620</b>
Candidate Name	Category/Type 007	
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. Sanchos Tacos</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2014
Mailing Address 3014 W Balboa Blvd		Amount of Each Disbursement this Period 74.62
City Newport Beach	State CA	
Zip Code 92663	Purpose of Disbursement Volunteer Food	<b>Transaction ID : EXPB8634</b>
Candidate Name	Category/Type 007	
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. Seacliff Self Storage</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2014
Mailing Address 18100 Kovacs Lane		Amount of Each Disbursement this Period 221.00
City Huntington Beach	State CA	
Zip Code 92648	Purpose of Disbursement Campaign Storage	<b>Transaction ID : EXPB8609</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	348.11
<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 38 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Shell</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 1201 Baker Street		Amount of Each Disbursement this Period 55.95
City Costa Mesa	State CA	
Zip Code 92626	Purpose of Disbursement Fuel	<b>Transaction ID : EXPB8668</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Skosh Monahans</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 2000 Newport Blvd # C		Amount of Each Disbursement this Period 4471.35
City Costa Mesa	State CA	
Zip Code 92627	Purpose of Disbursement Fundraiser Expenses	<b>Transaction ID : EXPB8697</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Smart &amp; Final</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 707 West 19th Street		Amount of Each Disbursement this Period 272.55
City Costa Mesa	State CA	
Zip Code 92627	Purpose of Disbursement Fundraiser Food & Beverage	<b>Transaction ID : EXPB8651</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4799.85
<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 39 OF 53			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 7131 Yorktown Ave.		Amount of Each Disbursement this Period 52.89
City Huntington Beach	State CA	
Zip Code 92648	Purpose of Disbursement Campaign Office Supplies	Transaction ID : EXPB8614
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 7131 Yorktown Ave.		Amount of Each Disbursement this Period 11.33
City Huntington Beach	State CA	
Zip Code 92648	Purpose of Disbursement Campaign Office Supplies	Transaction ID : EXPB8615
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 7131 Yorktown Ave.		Amount of Each Disbursement this Period 377.21
City Huntington Beach	State CA	
Zip Code 92648	Purpose of Disbursement Campaign Office Supplies	Transaction ID : EXPB8626
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	441.43
<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 40 OF 53			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 7131 Yorktown Ave.		Amount of Each Disbursement this Period 97.33
City Huntington Beach	State CA	
Purpose of Disbursement Campaign Office Supplies	Zip Code 92648	Category/ Type 001
Candidate Name		
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. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 7131 Yorktown Ave.		Amount of Each Disbursement this Period 10.03
City Huntington Beach	State CA	
Purpose of Disbursement Campaign Office Supplies	Zip Code 92648	Category/ Type 001
Candidate Name		
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 04 / 30 / 2014
Mailing Address 7131 Yorktown Ave.		Amount of Each Disbursement this Period 557.23
City Huntington Beach	State CA	
Purpose of Disbursement Campaign Office Supplies	Zip Code 92648	Category/ Type 001
Candidate Name		
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).....	664.59
<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 41 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 7131 Yorktown Ave.		Amount of Each Disbursement this Period 360.04
City Huntington Beach	State CA	
Zip Code 92648	Purpose of Disbursement Campaign Office Supplies	<b>Transaction ID : EXPB8661</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Home Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 2300 Harbor Boulevard		Amount of Each Disbursement this Period 424.59
City Costa Mesa	State CA	
Zip Code 92626	Purpose of Disbursement Campaign HQ Supplies	<b>Transaction ID : EXPB8627</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Pizza Bakery</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 1741 Westcliff Dr		Amount of Each Disbursement this Period 56.70
City Newport Beach	State Ca	
Zip Code 92660	Purpose of Disbursement Volunteer Food	<b>Transaction ID : EXPB8622</b>
Candidate Name	007 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).....	841.33
<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 42 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Trader Joe's</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 640 West 17th Street		Amount of Each Disbursement this Period 171.03
City Costa Mesa	State CA	
Zip Code 92626	Purpose of Disbursement Fundraiser Food & Beverage	<b>Transaction ID : EXPB8650</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cyndi Uhlenhoff</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 102 Via Plumosa		Amount of Each Disbursement this Period 750.00
City San Clemente	State CA	
Zip Code 92673	Purpose of Disbursement HQ Salary	<b>Transaction ID : EXPB8693</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Cyndi Uhlenhoff</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 102 Via Plumosa		Amount of Each Disbursement this Period 250.00
City San Clemente	State CA	
Zip Code 92673	Purpose of Disbursement HQ Salary	<b>Transaction ID : EXPB8699</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1171.03
<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 43 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Unocal</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 2281 Newport Boulevard		Amount of Each Disbursement this Period 95.70
City Costa Mesa	State CA	
Zip Code 92627	Purpose of Disbursement District Travel	<b>Transaction ID : EXPB8705</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ustream TV</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 410 Townsend Street, Ste 400		Amount of Each Disbursement this Period 99.00
City San Francisco	State CA	
Zip Code 94107	Purpose of Disbursement Web/Online Services	<b>Transaction ID : EXPB8613</b>
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Ustream TV</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 410 Townsend Street, Ste 400		Amount of Each Disbursement this Period 99.00
City San Francisco	State CA	
Zip Code 94107	Purpose of Disbursement Web/Online Services	<b>Transaction ID : EXPB8659</b>
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	293.70
<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 44 OF 53	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Ware Disposal Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 1035 E 4th St		Amount of Each Disbursement this Period 375.00
City Santa Ana State CA Zip Code 92701	Purpose of Disbursement Waste Services Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : EXPB8623</b>

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 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:	

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).....	375.00
<b>TOTAL</b> This Period (last page this line number only).....	48762.63

**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 45 OF 53	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Michelle E. Steel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address PO Box 472		Amount of Each Disbursement this Period 2150.00 <b>Transaction ID : EXPB8683</b>
City Surfside	State CA	
Zip Code 90743	Purpose of Disbursement Contribution Refund	Category/ Type 010
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	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Michelle E. Steel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address PO Box 472		Amount of Each Disbursement this Period 900.00 <b>Transaction ID : EXPB8684</b>
City Surfside	State CA	
Zip Code 90743	Purpose of Disbursement Contribution Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Shawn Steel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address PO Box 472		Amount of Each Disbursement this Period 2600.00 <b>Transaction ID : EXPB8685</b>
City Surfside	State CA	
Zip Code 90743	Purpose of Disbursement Contribution Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5650.00
<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 46 OF 53	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Shawn Steel</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014	
Mailing Address PO Box 472			Amount of Each Disbursement this Period 450.00	
City Surfside	State CA	Zip Code 90743	Transaction ID : EXPB8686	
Purpose of Disbursement Contribution Refund		010 Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>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).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	6100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 53	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Huntington Harbor Republican Women</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 1956		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : EXPB8688</b>
City Huntington Beach	State CA	
Zip Code 92647-1956	Purpose of Disbursement Contribution	Category/ Type 011
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. Laguna Niguel Republican Women Federated</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address P.O. Box 6532		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : EXPB8689</b>
City Laguna Niguel	State CA	
Zip Code 92607	Purpose of Disbursement Contribution	Category/ Type 011
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. Newport Harbor Republican Women</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address P.O. Box 5561		Amount of Each Disbursement this Period 45.00 <b>Transaction ID : EXPB8687</b>
City Newport Beach	State CA	
Zip Code 92662	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name <b>Newport Harbor Republican Women</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).....	125.00
<b>TOTAL</b> This Period (last page this line number only).....	125.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : RCVC7312**  
**Committee to Re-Elect Congressman Rohrabacher**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**Barbara Alby for Assembly, Barbara**

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 10415 Folsom Blvd #102

City State ZIP Code  
 Rancho Cordova CA 95670

Original Amount of Loan 1000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1000.00
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**TERMS**

Date Incurred: M 06 / D 07 / Y 1993  
 Date Due: M / D / Y 12/31/1993  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ [ ] 1000.00

**TOTALS** This Period (last page in this line only)..... ▶ [ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Congressman Rohrabacher** Transaction ID : **RCVC7314**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**Brian Bilbray for Congress**

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
c/o Freelove Consulting Group Inc.

City State ZIP Code  
San Diego CA 92171-0187

Original Amount of Loan 1000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1000.00
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**TERMS**

Date Incurred: M 10 / D 25 / Y 1994  
Date Due: M / D / Y 12/31/1994  
Interest Rate: 0.00 % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 1000.00

**TOTALS** This Period (last page in this line only)..... ▶ [ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Congressman Rohrabacher** Transaction ID : **RCVC7316**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Righeimer Assembly 2000</b>	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 533 Via Estrada Unit C	

City	State	ZIP Code
Laguna Hills	CA	92637

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
09 / 29 / 1999	09/28/2000	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	5000.00
<b>TOTALS</b> This Period (last page in this line only).....	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Congressman Rohrabacher** Transaction ID : **RCVC7318**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Righeimer Assembly 2000</b>	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 533 Via Estrada Unit C	

City	State	ZIP Code
Laguna Hills	CA	92637

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 06 / Y 2000	M M / D D / Y 03/06/2001	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	10000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>		

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Congressman Rohrabacher** Transaction ID : RCVC7320

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Tom Bordonaro for Congress</b>	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 5275 Camp Eight Road	

City	State	ZIP Code
Paso Robles	CA	93466

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 01 / D 06 / Y 1998	M M / D D / Y 12/31/1998	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	1000.00
<b>TOTALS</b> This Period (last page in this line only).....	<input type="text"/>
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Congressman Rohrabacher** Transaction ID : **RCVC7322**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Tom Bordonaro for Congress</b>	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 5275 Camp Eight Road	

City	State	ZIP Code
Paso Robles	CA	93466

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 02 / Y 1998	M M / D D / Y 12/31/1998	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	1000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	19000.00

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**