

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
Barbara Mulvaney for Congress

ADDRESS (number and street) 2730 Davonport Road
Check if different than previously reported. (ACC) San Marino CA 91108

2. FEC IDENTIFICATION NUMBER C C00556555
3. IS THIS REPORT NEW (N) OR AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
CA 33

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[X] April 15 Quarterly Report (Q1)
[] July 15 Quarterly Report (Q2)
[] October 15 Quarterly Report (Q3)
[] January 31 Year-End Report (YE)
[] Termination Report (TER)

(b) 12-Day PRE-Election Report for the:
[] Primary (12P) [] General (12G) [] Runoff (12R)
[] Convention (12C) [] Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day POST-Election Report for the:
[] General (30G) [] Runoff (30R) [] Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2014 through M M / D D / Y Y Y Y 03 / 31 / 2014

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

Type or Print Name of Treasurer Jana Mulvaney

Signature of Treasurer Jana Mulvaney [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 15 / 2014

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

Office Use Only grid and FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Barbara Mulvaney for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	10505.00	10505.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	10505.00	10505.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	100108.14	100108.14
(b) Total Offsets to Operating Expenditures (from Line 14).....	108.00	108.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	100000.14	100000.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	20557.22	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	110050.00	

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

Barbara Mulvaney for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7960.00	7960.00
(ii) Unitemized.....	2545.00	2545.00
(iii) TOTAL of contributions from individuals ▶	10505.00	10505.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	10505.00	10505.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	110050.00	110050.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	110050.00	110050.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	108.00	108.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	2.36	2.36
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	120665.36	120665.36

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	100108.14	100108.14
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	100108.14	100108.14

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	120665.36
25. SUBTOTAL (add Line 23 and Line 24).....	120665.36
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	100108.14
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	20557.22

**SCHEDULE A (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 28
	<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)
Barbara Mulvaney for Congress

A. Full Name (Last, First, Middle Initial)
Anthony Eterno

Mailing Address 8263 Toll House Rd

City Annandale State VA Zip Code 22003

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

Name of Employer State Dept Occupation Foreign Service Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 08 / 2014

Transaction ID : VNJ2DCF5GG0

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Doug Wick

Mailing Address 433 N Camden Dr Ste 600

City Beverly Hills State CA Zip Code 90210-4416

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

Name of Employer State Dept Occupation Producer

Red Wagon Entertainment

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : VNJ2DCF5VM0

Amount of Each Receipt this Period
 500.00

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

Mailing Address 11451 W Side Potter Valley Rd

City Potter Valley State CA Zip Code 95469-8721

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

Name of Employer State Dept Occupation Vintner

Self

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : VNJ2DCF5FX0

Amount of Each Receipt this Period
 100.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 28
	<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)
Barbara Mulvaney for Congress

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

Mailing Address 11451 W Side Potter Valley Rd

City: Potter Valley State: CA Zip Code: 95469-8721

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

Name of Employer: Self Occupation: Vintner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1135.00

Date of Receipt: 03 / 27 / 2014

Transaction ID : VNJ2DCFTKG2

Amount of Each Receipt this Period: 35.00

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

Mailing Address 2420 14th St NW Apt 513

City: Washington State: DC Zip Code: 20009

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

Name of Employer: Self Occupation: Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 350.00

Date of Receipt: 03 / 12 / 2014

Transaction ID : VNJ2DCF5GM2

Amount of Each Receipt this Period: 350.00

C. Full Name (Last, First, Middle Initial)
Cynthia Cline

Mailing Address 10131 Twila Springs Ct

City: Houston State: TX Zip Code: 77095-2449

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

Name of Employer: Self Occupation: Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 28 / 2014

Transaction ID : VNJ2DCG1V83

Amount of Each Receipt this Period: 500.00

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

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

885.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 28
	<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)
Barbara Mulvaney for Congress

A. Full Name (Last, First, Middle Initial)
Joan Hoberman

Mailing Address 4378 Willow Glen St

City Calabasas State CA Zip Code 91302-1976

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

Name of Employer Hoberman Mediation, Inc. Occupation Mediator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2014

Transaction ID : VNJ2DCE4P74

Amount of Each Receipt this Period
 350.00

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

Mailing Address 13900 SW 73rd Ct

City Palmetto Bay State FL Zip Code 33158-1216

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

Name of Employer Director of Children's Legal Services Occupation Inspector General

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2014

Transaction ID : VNJ2DCF5GE4

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Peg Schultz-Akerson

Mailing Address 1733 Sunset Ave

City Santa Monica State CA Zip Code 90405-5919

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

Name of Employer Self Occupation Clergy

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2014

Transaction ID : VNJ2DCFH0R4

Amount of Each Receipt this Period
 250.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 28
	<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)
Barbara Mulvaney for Congress

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

Mailing Address 11451 W Side Potter Valley Rd

City: Potter Valley State: CA Zip Code: 95469-8721

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

Name of Employer: Self Occupation: Vintner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1100.00

Date of Receipt: 02 / 14 / 2014

Transaction ID : VNJ2DCF5G95

Amount of Each Receipt this Period: 1000.00

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

Mailing Address 1418 Avenida De Cortez

City: Pacific Palisades State: CA Zip Code: 90272-2125

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

Name of Employer: Self Occupation: Producer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 20 / 2014

Transaction ID : VNJ2DCENAJ5

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Roberta Baldini

Mailing Address 15818 Riverside Dr W Apt 2K

City: New York State: NY Zip Code: 10032-1062

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

Name of Employer: United Nations Occupation: Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 20 / 2014

Transaction ID : VNJ2DCEKEA6

Amount of Each Receipt this Period: 500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 28
	<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)
Barbara Mulvaney for Congress

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

Mailing Address 110 S Kings Rd

City Los Angeles State CA Zip Code 90048-4110

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

Name of Employer Self Occupation Freelance Filmmaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 27 / 2014

Transaction ID : VNJ2DCF5MG6

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Allegra Klein

Mailing Address 1437 1st Ave

City New York State NY Zip Code 10021-3334

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

Name of Employer Mselect Occupation Head of Training

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 09 / 2014

Transaction ID : VNJ2DCF5GJ6

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Sybil Stoller

Mailing Address 1100 Rivas Cyn

City Pacific Palisades State CA Zip Code 90272-3961

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

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

Transaction ID : VNJ2DCEFN7

Amount of Each Receipt this Period
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 28
	<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)
Barbara Mulvaney for Congress

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

Mailing Address 308 N Edgewood St

City State Zip Code
Arlington VA 22201-1224

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : VNJ2DCE4KZ7

Amount of Each Receipt this Period
375.00

B. Full Name (Last, First, Middle Initial)
Lillian Zacky

Mailing Address 1010 Moraga Dr

City State Zip Code
Los Angeles CA 90049-1621

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

Name of Employer Occupation
Self Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : VNJ2DCFQEC8

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Margery Nicolson

Mailing Address 1238 Monument St

City State Zip Code
Pacific Palisades CA 90272-2541

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : VNJ2DCFBTG9

Amount of Each Receipt this Period
1000.00

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

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

2375.00

7960.00

**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 28
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Barbara Mulvaney for Congress

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

Mailing Address 2370 Davonport Road

City San Marino State CA Zip Code 91108

FEC ID number of contributing federal political committee. **C H4CA33127**

Name of Employer Self Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
25000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2014

Transaction ID : VNJ2DCMTMW0

Amount of Each Receipt this Period
25000.00

B. Full Name (Last, First, Middle Initial)
Barbara Mulvaney

Mailing Address 2370 Davonport Road

City San Marino State CA Zip Code 91108

FEC ID number of contributing federal political committee. **C H4CA33127**

Name of Employer Self Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
110050.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : VNJ2DCMV172

Amount of Each Receipt this Period
10000.00

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

Mailing Address 2370 Davonport Road

City San Marino State CA Zip Code 91108

FEC ID number of contributing federal political committee. **C H4CA33127**

Name of Employer Self Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100050.00

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

Transaction ID : VNJ2DCMV1B4

Amount of Each Receipt this Period
50.00

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

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

35050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 28
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Barbara Mulvaney for Congress

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

Mailing Address 2370 Davonport Road

City San Marino State CA Zip Code 91108

FEC ID number of contributing federal political committee. **C H4CA33127**

Name of Employer Self Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 24 / 2014

Transaction ID : VNJ2DCMTMX7

Amount of Each Receipt this Period
75000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

75000.00

110050.00

**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 13 OF 28	
	<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)
Barbara Mulvaney for Congress

Full Name (Last, First, Middle Initial) A. The House of Printing		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 3336 E Colorado Blvd		Amount of Each Disbursement this Period 188.57
City Pasadena State CA Zip Code 91107-3861	Purpose of Disbursement Printing	
Candidate Name	Category/Type	Transaction ID : VNH359S0G20
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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. The House of Printing		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address 3336 E Colorado Blvd		Amount of Each Disbursement this Period 458.89
City Pasadena State CA Zip Code 91107-3861	Purpose of Disbursement Printing	
Candidate Name	Category/Type	Transaction ID : VNH359S0G60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Allied Integrated Marketing		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 55 Cambridge Pkwy Ste 200		Amount of Each Disbursement this Period 7250.00
City Cambridge State MA Zip Code 02142-1218	Purpose of Disbursement Media Consulting	
Candidate Name	Category/Type	Transaction ID : VNH359S0FF0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7897.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 28			
	<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)
Barbara Mulvaney for Congress

Full Name (Last, First, Middle Initial) A. California Young Democrats			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 455 Capitol Mall Ste 500			Amount of Each Disbursement this Period 250.00 Transaction ID : VNH359S0HZ0
City Sacramento	State CA	Zip Code 95814-4433	
Purpose of Disbursement Sponsorship Fee		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. The House of Printing			Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 3336 E Colorado Blvd			Amount of Each Disbursement this Period 1516.19 Transaction ID : VNH359S0GA1
City Pasadena	State CA	Zip Code 91107-3861	
Purpose of Disbursement Printing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Staples			Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 1501 Lincoln Blvd			Amount of Each Disbursement this Period 237.93 Transaction ID : VNH359S0HN1
City Venice	State CA	Zip Code 90291-3503	
Purpose of Disbursement Office Supplies		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	2004.12
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 15 OF 28			
	<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)
Barbara Mulvaney for Congress

Full Name (Last, First, Middle Initial) A. Nebula Group USA LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 4320 S Louise Ave Ste 103		Amount of Each Disbursement this Period 6000.00
City Sioux Falls	State SD	
Zip Code 57106-3134	Purpose of Disbursement General Consulting	Transaction ID : VNH359S0GX1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Pivotal Targeting		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 215 N Marengo Ave Ste 160		Amount of Each Disbursement this Period 15000.00
City Pasadena	State CA	
Zip Code 91101-1524	Purpose of Disbursement General Campaign Consulting	Transaction ID : VNH359S0HB2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Jamie Clark		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 1545 Granville Ave Apt 5		Amount of Each Disbursement this Period 270.00
City Los Angeles	State CA	
Zip Code 90025-2822	Purpose of Disbursement Salary	Transaction ID : VNH359S0JH2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	21270.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 28			
	<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)
Barbara Mulvaney for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 1501 Lincoln Blvd		Amount of Each Disbursement this Period 994.97
City Venice State CA Zip Code 90291-3503	Purpose of Disbursement Office Supplies	
Candidate Name		Transaction ID : VNH359S0GR2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 1501 Lincoln Blvd		Amount of Each Disbursement this Period 78.79
City Venice State CA Zip Code 90291-3503	Purpose of Disbursement Office Supplies	
Candidate Name		Transaction ID : VNH359S0H63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Brian Hodes		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 287 S Robertson Blvd		Amount of Each Disbursement this Period 450.00
City Beverly Hills State CA Zip Code 90211-2810	Purpose of Disbursement Photography	
Candidate Name		Transaction ID : VNH359S0A83
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1523.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 28			
	<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)
Barbara Mulvaney for Congress

Full Name (Last, First, Middle Initial) A. California Democratic Party			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 1401 21st St			Amount of Each Disbursement this Period 350.00 Transaction ID : VNH359S0G93
City Sacramento	State CA	Zip Code 95811-5226	
Purpose of Disbursement Filing Fee		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. Christensen & Associates, Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 209 Pennsylvania Ave SE			Amount of Each Disbursement this Period 8500.00 Transaction ID : VNH359S0G44
City Washington	State DC	Zip Code 20003-1107	
Purpose of Disbursement Fundraising Consulting		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) c. Christian Schneider			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 57 Maple Dr			Amount of Each Disbursement this Period 6000.00 Transaction ID : VNH359S0HA4
City Spring Lake	State NJ	Zip Code 07762-2150	
Purpose of Disbursement General Campaign Consulting		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	14850.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 28			
	<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)
Barbara Mulvaney for Congress

Full Name (Last, First, Middle Initial) A. Christian Schneider			Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 57 Maple Dr			Amount of Each Disbursement this Period 4000.00	
City Spring Lake	State NJ	Zip Code 07762-2150	Transaction ID : VNH359S0HF4	
Purpose of Disbursement General Campaign Consulting		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. Staples			Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014	
Mailing Address 1501 Lincoln Blvd			Amount of Each Disbursement this Period 470.88	
City Venice	State CA	Zip Code 90291-3503	Transaction ID : VNH359S0HX4	
Purpose of Disbursement Office Supplies		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Christian Schneider			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014	
Mailing Address 57 Maple Dr			Amount of Each Disbursement this Period 2000.00	
City Spring Lake	State NJ	Zip Code 07762-2150	Transaction ID : VNH359S0H55	
Purpose of Disbursement General Campaign Consulting		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	6470.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 28	
	<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)
Barbara Mulvaney for Congress

Full Name (Last, First, Middle Initial) A. Targetsmart Communications		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 1750 K St NW Ste 700		Amount of Each Disbursement this Period 5500.00 Transaction ID : VNH359S0J65
City Washington	State DC Zip Code 20006-2319	
Purpose of Disbursement Fundraising Consulting	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. California Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 1401 21st St		Amount of Each Disbursement this Period 500.00 Transaction ID : VNH359S0GD5
City Sacramento	State CA Zip Code 95811-5226	
Purpose of Disbursement Convention Sponsorship	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Jenna Procella		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 3017 Parish Cemetery Rd		Amount of Each Disbursement this Period 500.00 Transaction ID : VNH359S0HR5
City Orange	State TX Zip Code 77632-1783	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 28	
	<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)
Barbara Mulvaney for Congress

Full Name (Last, First, Middle Initial)
A. Staples

Mailing Address 1501 Lincoln Blvd

City Venice State CA Zip Code 90291-3503

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 12 / 2014

Amount of Each Disbursement this Period: 582.04

Transaction ID : VNH359S0HE6

Full Name (Last, First, Middle Initial)
B. Political Data

Mailing Address PO Box 59570

City Norwalk State CA Zip Code 90652-0570

Purpose of Disbursement Office Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 20 / 2014

Amount of Each Disbursement this Period: 6550.00

Transaction ID : VNH359S0J57

Full Name (Last, First, Middle Initial)
c. Eddy Conroy

Mailing Address 1601 W MacArthur Blvd
Apt 166

City Santa Ana State CA Zip Code 92704-7220

Purpose of Disbursement Research Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 21 / 2014

Amount of Each Disbursement this Period: 250.00

Transaction ID : VNH359S0JA7

SUBTOTAL of Disbursements This Page (optional) 7382.04

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 21 OF 28	
	<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)
Barbara Mulvaney for Congress

Full Name (Last, First, Middle Initial) A. Los Angeles County Registrar-Recorder			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 12400 Imperial Hwy			Amount of Each Disbursement this Period 120.00 Transaction ID : VNH359S0HJ7
City Norwalk	State CA	Zip Code 90650-3134	
Purpose of Disbursement Maps		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. Carmyn Egge			Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 3905 S Birchwood Ave			Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH359S0JX7
City Sioux Falls	State SD	Zip Code 57103-4603	
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Staples			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 1501 Lincoln Blvd			Amount of Each Disbursement this Period 362.13 Transaction ID : VNH359S0GZ7
City Venice	State CA	Zip Code 90291-3503	
Purpose of Disbursement Office Supplies		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1482.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 28	
	<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)
Barbara Mulvaney for Congress

Full Name (Last, First, Middle Initial) A. Los Angeles County Registrar-Recorder		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 12400 Imperial Hwy		Amount of Each Disbursement this Period 150.00 Transaction ID : VNH359S0H88
City Norwalk State CA Zip Code 90650-3134	Purpose of Disbursement Office Supplies 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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Los Angeles County Registrar-Recorder		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 12400 Imperial Hwy		Amount of Each Disbursement this Period 17233.00 Transaction ID : VNH359S0HD8
City Norwalk State CA Zip Code 90650-3134	Purpose of Disbursement Candidate Statement 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:	Category/Type	

Full Name (Last, First, Middle Initial) C. NGP VAN		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 8275.00 Transaction ID : VNH359S0FG8
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Office Expense 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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	25658.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 28	
	<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)
Barbara Mulvaney for Congress

Full Name (Last, First, Middle Initial) A. Rex Mulvaney		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 1209 Palms Blvd		Amount of Each Disbursement this Period 500.00 Transaction ID : VNH359S0HV8
City Venice	State CA	
Zip Code 90291-2905	Purpose of Disbursement Salary	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. Efficient Research		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 1001 S Prairie Ave		Amount of Each Disbursement this Period 487.60 Transaction ID : VNH359S0J99
City Sioux Falls	State SD	
Zip Code 57105-0526	Purpose of Disbursement Research Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Christensen & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1293.54 Transaction ID : VNH359S0GB9
City Washington	State DC	
Zip Code 20003-1107	Purpose of Disbursement Travel Expenses	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2281.14
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 28	
	<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)
Barbara Mulvaney for Congress

Full Name (Last, First, Middle Initial) A. Secretary of State		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 1500 11th St		Amount of Each Disbursement this Period 1724.92
City Sacramento State CA Zip Code 95814-5701	Purpose of Disbursement Filing Fee	
Candidate Name	Category/Type	Transaction ID : VNH359S0FS9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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. Secretary of State		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 1500 11th St		Amount of Each Disbursement this Period 5.00
City Sacramento State CA Zip Code 95814-5701	Purpose of Disbursement Voter File	
Candidate Name	Category/Type	Transaction ID : VNH359S0FY9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		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:	

SUBTOTAL of Disbursements This Page (optional).....	1729.92
TOTAL This Period (last page this line number only).....	99049.45

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

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNJ2DCMTMW0L

Barbara Mulvaney for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Barbara Mulvaney

Primary
 General
 Other (specify) ▼

Mailing Address
2370 Davonport Road

City State ZIP Code
San Marino CA 91108

Original Amount of Loan 25000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 25000.00
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TERMS

Date Incurred: M 02 / D 04 / Y 2014
Date Due: M / D / Y none
Interest Rate: none % (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)..... ▶ 25000.00
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

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNJ2DCMV172L

Barbara Mulvaney for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Barbara Mulvaney

Primary

General

Other (specify) ▼

Mailing Address

2370 Davonport Road

City

State

ZIP Code

San Marino

CA

91108

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 28 /

Y 2014 Y

M /

D /

Y none Y

none % (apr)

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)..... ▶

10000.00

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

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNJ2DCMV1B4L

Barbara Mulvaney for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Barbara Mulvaney

Primary

General

Other (specify) ▼

Mailing Address

2370 Davonport Road

City

State

ZIP Code

San Marino

CA

91108

Original Amount of Loan

50.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 03 /

D 06 /

Y 2014 Y

M M /

D D /

Y none Y Y

none % (apr)

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)..... ▶

50.00

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) **Barbara Mulvaney for Congress** Transaction ID : **VNJ2DCMTMX7L**

LOAN SOURCE Full Name (Last, First, Middle Initial) Barbara Mulvaney	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2370 Davonport Road		

City	State	ZIP Code
San Marino	CA	91108

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
75000.00	0.00	75000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 02 / D 24 / Y 2014 Y	M M / D D / Y Y Y Y	none % (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 style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="75000.00"/>
TOTALS This Period (last page in this line only).....	<input style="width: 100%;" type="text" value="110050.00"/>

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