

# 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

Tetalman for Congress

ADDRESS (number and street) ▼

1531 Grand Avenue

Suite D

Check if different than previously reported. (ACC)

San Marcos

CA

92078

2. FEC IDENTIFICATION NUMBER ▼

C C00500975

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

49

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Xavier Martinez

Signature of Treasurer Xavier Martinez

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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  
**Tetalman 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))....	56013.07	85957.32
(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)).....	56013.07	85957.32
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	38831.18	67917.05
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	410.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	38831.18	67507.05
8. Cash on Hand at Close of Reporting Period (from Line 27).....	31300.27	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	13652.50	

**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

**Tetalman for Congress**

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).....	24940.00	35789.00
(ii) Unitemized.....	28574.07	46669.32
(iii) TOTAL of contributions from individuals ▶	53514.07	82458.32
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2499.00	3499.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	56013.07	85957.32
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	8000.00	13000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	8000.00	13000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	410.00
<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>	64013.07	99367.32

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	38831.18	67917.05
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 .....	150.00	150.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	38981.18	68067.05

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	6268.38
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	64013.07
25. SUBTOTAL (add Line 23 and Line 24).....	70281.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	38981.18
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	31300.27

**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 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 2212 Rosemont Lane

City Encinitas State CA Zip Code 92024

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

Name of Employer Retired Occupation None

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 16 / 2012

**Transaction ID : SA11AI.5518**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 2705 Cepa Uno

City San Clemente State CA Zip Code 92673

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

Name of Employer Chop Shop Entertainment Occupation Film Maker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2012

**Transaction ID : SA11AI.5876**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21915.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2012

**Transaction ID : SA11AI.5876.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 2705 Cepa Uno

City San Clemente State CA Zip Code 92673

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

Name of Employer Chop Shop Entertainment Occupation Film Maker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2012**

**Transaction ID : SA11AI.5986**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 2425 Ellentown Road

City La Jolla State CA Zip Code 92037

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

Name of Employer Retired Occupation None

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 20 / 2012**

**Transaction ID : SA11AI.5744**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 1446 Pine Ridge Road

City Oceanside State CA Zip Code 92057

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

Name of Employer Lori Baker, Quality Assurance Occupation Quality Assurance

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 16 / 2012**

**Transaction ID : SA11AI.5379**

Amount of Each Receipt this Period  
**500.00**

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
19039.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 16 / 2012

**Transaction ID : SA11AI.5379.0**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

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

Mailing Address 34 Campanilla

City State Zip Code  
San Clemente CA 92673

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
220.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2012

**Transaction ID : SA11AI.6337**

Amount of Each Receipt this Period  
100.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
36763.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2012

**Transaction ID : SA11AI.6337.0**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

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

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

100.00

**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 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 251 Stratford Park Circle

City State Zip Code  
Del Mar CA 92014

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

Name of Employer Occupation  
Giles Bateman Company Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 25 / 2012

**Transaction ID : SA11AI.5580**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
11004.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 25 / 2012

**Transaction ID : SA11AI.5580.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

Mailing Address 7919 Via Ensenada

City State Zip Code  
Carlsbad CA 92009

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

Name of Employer Occupation  
Retired None

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
665.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 25 / 2012

**Transaction ID : SA11AI.5304**

Amount of Each Receipt this Period  
250.00

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

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

500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 5615 Sunfield Avenue

City State Zip Code  
Lakewood CA 90712

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

Name of Employer Occupation  
United States Post Office Letter Carrier

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 26 / 2012

**Transaction ID : SA11AI.6310**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
35463.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 26 / 2012

**Transaction ID : SA11AI.6310.0**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**

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

Mailing Address 900 N. Cleveland Stret Spc 157H

City State Zip Code  
Oceanside CA 92054

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

Name of Employer Occupation  
None Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 21 / 2012

**Transaction ID : SA11AI.6549**

Amount of Each Receipt this Period  
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 11 Corte Sevilla

City San Clemente State CA Zip Code 92673

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2012

**Transaction ID : SA11AI.6228**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21505.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2012

**Transaction ID : SA11AI.6228.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

Mailing Address 100 10th Street

City Del Mar State CA Zip Code 92014

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

Name of Employer Occupation  
Claire's on Cedros Business Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 16 / 2012

**Transaction ID : SA11AI.5521**

Amount of Each Receipt this Period  
500.00

**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: PAGE 11 OF 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

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

Mailing Address 901 D Caminito Madrigal

City Carlsbad State CA Zip Code 92011

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2012

**Transaction ID : SA11AI.5666**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 280 La Veta Avenue

City Encinitas State CA Zip Code 92024

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 30 / 2012

**Transaction ID : SA11AI.5575**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 3010 Cadencia

City Carlsbad State CA Zip Code 92009

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

Name of Employer Information Requested Occupation Information Requested  
Retired None

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : SA11AI.6346**

Amount of Each Receipt this Period  
50.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
37613.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2012

**Transaction ID : SA11AI.6346.0**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**

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

Mailing Address 1206 Barbara Drive

City State Zip Code  
Vista CA 92084

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

Name of Employer Occupation  
SAIC Software Analyst

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 13 / 2012

**Transaction ID : SA11AI.5352**

Amount of Each Receipt this Period  
300.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
16979.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 13 / 2012

**Transaction ID : SA11AI.5352.0**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 1206 Barbara Drive

City Vista State CA Zip Code 92084

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

Name of Employer SAIC Occupation Software Analyst

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
545.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : SA11AI.5338**

Amount of Each Receipt this Period  
170.00

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

Mailing Address 1206 Barbara Drive

City Vista State CA Zip Code 92084

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

Name of Employer SAIC Occupation Software Analyst

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
570.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2012

**Transaction ID : SA11AI.5891**

Amount of Each Receipt this Period  
25.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
23573.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2012

**Transaction ID : SA11AI.5891.0**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**

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

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

195.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 1206 Barbara Drive

City Vista State CA Zip Code 92084

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

Name of Employer SAIC Occupation Software Analyst

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 820.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2012

**Transaction ID : SA11AI.6157**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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

Mailing Address P.O. Box 8661

City Rancho Santa Fe State CA Zip Code 92067

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

Name of Employer Retired Occupation None

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2012

**Transaction ID : SA11AI.5644**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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

Mailing Address 1068 Arden Drive

City Encinitas State CA Zip Code 92024

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2012

**Transaction ID : SA11AI.6543**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 200.00

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

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

\_\_\_\_\_ 700.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 805 Avenida Presidio

City San Clemente State CA Zip Code 92673

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : SA11AI.6339**

Amount of Each Receipt this Period  
500.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
37363.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : SA11AI.6339.0**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

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

Mailing Address 805 Avenida Presidio

City San Clemente State CA Zip Code 92672

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1050.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2012

**Transaction ID : SA11AI.6500**

Amount of Each Receipt this Period  
1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 805 Avenida Presidio

City San Clemente State CA Zip Code 92672

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1199.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6505**

Amount of Each Receipt this Period  
149.00

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

Mailing Address 7912 Entrada De Luz

City San Diego State CA Zip Code 92127

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : SA11AI.5587**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
11289.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : SA11AI.5587.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

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

399.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 7912 Entrada De Luz

City San Diego State CA Zip Code 92127

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2012

**Transaction ID : SA11AI.5798**

Amount of Each Receipt this Period  
300.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
30328.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2012

**Transaction ID : SA11AI.5798.0**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

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

Mailing Address 7912 Entrada De Luz

City San Diego State CA Zip Code 92127

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : SA11AI.6396**

Amount of Each Receipt this Period  
300.00

**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 18 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
31263.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : SA11AI.6396.0**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

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

Mailing Address 7831 Rush Rose Drive

City State Zip Code  
Carlsbad CA 92009

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

Name of Employer Occupation  
None Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 23 / 2012

**Transaction ID : SA11AI.6541**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 7831 Rush Rose Drive  
Unit 217

City State Zip Code  
Carlsbad CA 92009

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

Name of Employer Occupation  
Retired None

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 22 / 2012

**Transaction ID : SA11AI.5755**

Amount of Each Receipt this Period  
500.00

**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: PAGE 19 OF 85  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

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

Mailing Address 2115 Softwind Lane

City Encinitas State CA Zip Code 92024

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

Name of Employer None Occupation Not Employed

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2012

**Transaction ID : SA11AI.5423**

Amount of Each Receipt this Period  
 400.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2012

**Transaction ID : SA11AI.5423.0**

Amount of Each Receipt this Period  
 400.00

**[MEMO ITEM]**

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

Mailing Address 2144 Via Campo

City Cardiff State CA Zip Code 92007

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2012

**Transaction ID : SA11AI.5371**

Amount of Each Receipt this Period  
 100.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
18164.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 15 / 2012

**Transaction ID : SA11AI.5371.0**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

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

Mailing Address 2144 Via Campo

City State Zip Code  
Cardiff CA 92007

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

Name of Employer Occupation  
None Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
398.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 11 / 2012

**Transaction ID : SA11AI.5790**

Amount of Each Receipt this Period  
100.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
29328.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 11 / 2012

**Transaction ID : SA11AI.5790.0**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

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

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. Box 1125

City State Zip Code  
La Jolla CA 92038

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

Name of Employer Occupation  
A-440 Enterprises, Inc Corporate Officer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : SA11AI.5878**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
22165.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : SA11AI.5878.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

Mailing Address 2215 Avenida Platanar

City State Zip Code  
San Clemente CA 92673

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11AI.5995**

Amount of Each Receipt this Period  
100.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 6481 Timbermill Way

City Reynoldsburg State OH Zip Code 43068

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

Name of Employer: Clinical Social Worker Occupation: Nationwide Childrens Hospital

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 750.00

Date of Receipt: 08 / 09 / 2012

**Transaction ID : SA11AI.5414**

Amount of Each Receipt this Period: 500.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 13504.00

Date of Receipt: 08 / 09 / 2012

**Transaction ID : SA11AI.5414.0**

Amount of Each Receipt this Period: 500.00

**[MEMO ITEM]**

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

Mailing Address 4018 Isle Drive

City Carlsbad State CA Zip Code 92008

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

Name of Employer: None Occupation: Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 09 / 19 / 2012

**Transaction ID : SA11AI.5745**

Amount of Each Receipt this Period: 100.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 4015 Isle Drive

City Carlsbad State CA Zip Code 92008

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

Name of Employer U.S. Senate Occupation Constituent Communications Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2012

**Transaction ID : SA11AI.5598**

Amount of Each Receipt this Period  
200.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
11874.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2012

**Transaction ID : SA11AI.5598.0**

Amount of Each Receipt this Period  
200.00

**[MEMO ITEM]**

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

Mailing Address 3433 Capri Way  
Unit 3

City Oceanside State CA Zip Code 92056

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

Name of Employer Kaplan College Occupation Nursing Instructor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012

**Transaction ID : SA11AI.5385**

Amount of Each Receipt this Period  
300.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
19324.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2012

**Transaction ID : SA11AI.5385.0**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

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

Mailing Address 1650 N. El Camino Real

City State Zip Code  
San Clemente CA 92672

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

Name of Employer Occupation  
Ocean Auto Sales Business Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 20 / 2012

**Transaction ID : SA11AI.6032**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 821 8th Street

City State Zip Code  
Manhattan Beach CA 90266

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

Name of Employer Occupation  
None Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 21 / 2012

**Transaction ID : SA11AI.6544**

Amount of Each Receipt this Period  
250.00

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

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

500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 6915 Neptune Place

City State Zip Code  
La Jolla CA 92037

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

Name of Employer Occupation  
Iredale & Yoo APC Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : SA11AI.5298**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1601 Gasony Road

City State Zip Code  
Encinitas CA 92024

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

Name of Employer Occupation  
None Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 16 / 2012

**Transaction ID : SA11AI.5382**

Amount of Each Receipt this Period  
60.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
19124.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 16 / 2012

**Transaction ID : SA11AI.5382.0**

Amount of Each Receipt this Period  
60.00

**[MEMO ITEM]**

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

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

310.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 3100 Front Street B

City San Diego, CA State CA Zip Code 92103

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

Name of Employer None Occupation Not Employed

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : SA11AI.6394**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
32388.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : SA11AI.6394.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

Mailing Address 4098 Manchester

City Encinitas State CA Zip Code 92024

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

Name of Employer Kim MacConnel, Artist Occupation Artist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2012

**Transaction ID : SA11AI.6484**

Amount of Each Receipt this Period  
200.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 4330 La Jolla Village Drive

City San Diego State AA Zip Code 92122

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

Name of Employer Lewism, Hoxie & Spear Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : SA11AI.5885**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
23415.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : SA11AI.5885.0**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**

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

Mailing Address 7844 Vista Lazanja

City San Diego State AA Zip Code 92127

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

Name of Employer John McQuire, Trial Lawyer Occupation Trial Lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2012

**Transaction ID : SA11AI.5415**

Amount of Each Receipt this Period  
2000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
15504.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2012

**Transaction ID : SA11AI.5415.0**

Amount of Each Receipt this Period  
2000.00

**[MEMO ITEM]**

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

Mailing Address 13676 Durango Drive

City State Zip Code  
Del Mar CA 92024

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

Name of Employer Occupation  
President Traveltrust

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2012

**Transaction ID : SA11AI.5796**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
30028.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2012

**Transaction ID : SA11AI.5796.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 2437 San Elijo Avenue

City State Zip Code  
Cardiff-by-the-Sea CA 92007

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

Name of Employer Occupation  
None Not Employed

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2012

**Transaction ID : SA11AI.6347**

Amount of Each Receipt this Period  
50.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
37663.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2012

**Transaction ID : SA11AI.6347.0**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**J. Floyd O'Connell**

Mailing Address 949 Eolus Avenue

City State Zip Code  
Encinitas CA 92024

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

Name of Employer Occupation  
None Retired Educator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 03 / 2012

**Transaction ID : SA11AI.6507**

Amount of Each Receipt this Period  
250.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 85
	<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)  
**Tetalman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**J. Floyd O'Connell**

Mailing Address 949 Eolus Avenue

City Encinitas State CA Zip Code 92024

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

Name of Employer None Occupation Retired Educator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
475.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : SA11AI.6304**

Amount of Each Receipt this Period  
75.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
33963.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : SA11AI.6304.0**

Amount of Each Receipt this Period  
75.00

**[MEMO ITEM]**

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

Mailing Address P.O. Box 3485

City Rancho Santa Fe State CA Zip Code 92067

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

Name of Employer Retired Occupation None

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
236.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : SA11AI.6225**

Amount of Each Receipt this Period  
36.00

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

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

111.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21205.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : SA11AI.6225.0**

Amount of Each Receipt this Period  
36.00

**[MEMO ITEM]**

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

Mailing Address P.O. Box 3485

City State Zip Code  
Rancho Santa Fe CA 92067

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

Name of Employer Occupation  
Retired None

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
336.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2012

**Transaction ID : SA11AI.5791**

Amount of Each Receipt this Period  
100.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
29428.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2012

**Transaction ID : SA11AI.5791.0**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

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

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 34092 Violet Lantern, Suite 200

City Dana Point State CA Zip Code 92629

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

Name of Employer Darryl Paul, Attorney Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2012

**Transaction ID : SA11AI.5639**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 4640 La Quenta Drive

City San Diego State CA Zip Code 92124

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

Name of Employer Pysicist Occupation Science Applications International Cor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2012

**Transaction ID : SA11AI.5794**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
29778.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2012

**Transaction ID : SA11AI.5794.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

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

450.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 868 Muirfield Drive

City Oceanside State CA Zip Code 92058

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2012

**Transaction ID : SA11AI.6562**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2318 Longfellow Road

City Carlsbad State CA Zip Code 92008

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

Name of Employer Information Requested Occupation Information Requested  
Univ. of Cal - San Diego Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11AI.6289**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Information Requested Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
33438.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11AI.6289.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 85
	<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)  
**Tetalman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SAN DIEGO COUNTY DEMOCRATIC PARTY (FED. ACCT.)**

Mailing Address 8340 CLAIREMONT MESA BOULEVARD  
SUITE 105

City SAN DIEGO State CA Zip Code 92111

FEC ID number of contributing federal political committee. **C** C00402826

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 14 / 2012

**Transaction ID : SA11AI.5638**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4532 Custer Terrace

City Harrisburg State PA Zip Code 17110

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

Name of Employer Occupation  
Mark, Schneier, Chiropractor Chiropractor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 22 / 2012

**Transaction ID : SA11AI.6211**

Amount of Each Receipt this Period  
100.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
20824.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 22 / 2012

**Transaction ID : SA11AI.6211.0**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 35 OF 85  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

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

Mailing Address 4532 Custer Terrace

City Harrisburg State PA Zip Code 17110

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

Name of Employer Mark, Schneier, Chiropractor Occupation Chiropractor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2012

**Transaction ID : SA11AI.6388**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 32938.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2012

**Transaction ID : SA11AI.6388.0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

**[MEMO ITEM]**

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

Mailing Address 2839 Via Conquistador

City Carlsbad State CA Zip Code 92009

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

Name of Employer Dennis Shanahan, Physician/Con Occupation Physician/Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2012

**Transaction ID : SA11AI.5417**

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

**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 36 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
16004.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2012

**Transaction ID : SA11AI.5417.0**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

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

Mailing Address 3930 Centre Street # 103

City State Zip Code  
San Diego CA 92103

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : SA11AI.5722**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1348 Cassins Street

City State Zip Code  
Carlsbad CA 92011

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

Name of Employer Occupation  
ASG Sales

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2012

**Transaction ID : SA11AI.5407**

Amount of Each Receipt this Period  
250.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12754.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2012

**Transaction ID : SA11AI.5407.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

Mailing Address 1348 Cassins Street

City State Zip Code  
Carlsbad CA 92011

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

Name of Employer Occupation  
ASG Sales

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : SA11AI.6294**

Amount of Each Receipt this Period  
50.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
33638.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : SA11AI.6294.0**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**

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

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

50.00

**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 38 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 144 Redwood Avenue

City Carlsbad State CA Zip Code 92008

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

Name of Employer B&M Hardware Occupation General Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **420.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : SA11AI.6540**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 7247 San Luis Street

City Carlsbad State CA Zip Code 92011

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2012

**Transaction ID : SA11AI.6566**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 7247 San Luis Street

City Carlsbad State CA Zip Code 92011

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : SA11AI.5717**

Amount of Each Receipt this Period  
**50.00**

**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 39 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 3580 Turquoise Lane

City Oceanside State CA Zip Code 92056

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2012

**Transaction ID : SA11AI.6488**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 624 Seabright Lane

City Solana Beach State CA Zip Code 92075

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

Name of Employer Information Requested Occupation Information Requested  
University of California Educator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : SA11AI.6297**

Amount of Each Receipt this Period  
50.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Information Requested Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
33738.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : SA11AI.6297.0**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 2171 Cambridge Avenue

City State Zip Code  
Cardiff CA 92007

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

Name of Employer Occupation  
Mira Costa College Teacher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 07 / 2012

**Transaction ID : SA11AI.6074**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
26973.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 07 / 2012

**Transaction ID : SA11AI.6074.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

Mailing Address P.O. Box 2027

City State Zip Code  
Rancho Santa Fe CA 92067

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

Name of Employer Occupation  
None Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 14 / 2012

**Transaction ID : SA11AI.5353**

Amount of Each Receipt this Period  
500.00

**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 41 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
17479.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 14 / 2012

**Transaction ID : SA11AI.5353.0**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

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

Mailing Address P.O. Box 2027

City State Zip Code  
Rancho Santa Fe CA 92067

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

Name of Employer Occupation  
None Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 26 / 2012

**Transaction ID : SA11AI.6309**

Amount of Each Receipt this Period  
200.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
34463.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 26 / 2012

**Transaction ID : SA11AI.6309.0**

Amount of Each Receipt this Period  
200.00

**[MEMO ITEM]**

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 42 OF 85  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

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

Mailing Address 410 Bridoon Terrace

City Encinitas State CA Zip Code 92024

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

Name of Employer None Occupation Not Employed

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : SA11AI.5925**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
24904.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : SA11AI.5925.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

Mailing Address 410 Bridoon Terrace

City Encinitas State CA Zip Code 92024

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

Name of Employer None Occupation Not Employed

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2012

**Transaction ID : SA11AI.5781**

Amount of Each Receipt this Period  
500.00

**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 43 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
29028.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 10 / 2012

**Transaction ID : SA11AI.5781.0**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

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

Mailing Address P.O. Box 9129

City State Zip Code  
San Diego CA 92169

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

Name of Employer Occupation  
NorStar Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : SA11AI.5531**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12324.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : SA11AI.5531.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. Box 9129

City San Diego State CA Zip Code 92169

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

Name of Employer NorStar Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : SA11AI.5921**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
24579.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : SA11AI.5921.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

Mailing Address P.O. Box 9129

City San Diego State CA Zip Code 92169

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

Name of Employer NorStar Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11AI.6348**

Amount of Each Receipt this Period  
250.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
37913.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11AI.6348.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

Mailing Address 5521 Mary Lane Drive

City State Zip Code  
San Diego CA 92115

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

Name of Employer Occupation  
None Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11AI.6326**

Amount of Each Receipt this Period  
300.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
36163.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11AI.6326.0**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 4748 Miletus Way

City Oceanside State CA Zip Code 92054

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2012

**Transaction ID : SA11AI.5409**

Amount of Each Receipt this Period  
100.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12854.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2012

**Transaction ID : SA11AI.5409.0**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

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

Mailing Address 4748 Miletus Way

City Oceanside State CA Zip Code 92054

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2012

**Transaction ID : SA11AI.5770**

Amount of Each Receipt this Period  
100.00

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 47 OF 85  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

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

Mailing Address 2196 Castilla Way

City Oceanside State CA Zip Code 92056

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

Name of Employer None Occupation Not Employed

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2012**

**Transaction ID : SA11AI.5989**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 2076 Sheridan Road

City Encinitas State CA Zip Code 92024

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2012**

**Transaction ID : SA11AI.5887**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 2076 Sheridan Road

City Encinitas State CA Zip Code 92024

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2012**

**Transaction ID : SA11AI.5887.0**

Amount of Each Receipt this Period  
**250.00**

**[MEMO ITEM]**

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

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

**300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 5205 Linea Del Cielo

City Rancho Santa Fe State CA Zip Code 92067

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

Name of Employer Carol Wilson, CPA Occupation CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1025.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2012

**Transaction ID : SA11AI.5295**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 5205 Linea Del Cielo

City Rancho Santa Fe State CA Zip Code 92067

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

Name of Employer Carol Wilson, CPA Occupation CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1125.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012

**Transaction ID : SA11AI.5392**

Amount of Each Receipt this Period  
100.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
19724.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012

**Transaction ID : SA11AI.5392.0**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

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

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

125.00



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

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

FOR LINE NUMBER: PAGE 49 OF 85  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

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

Mailing Address 5205 Linea Del Cielo

City Rancho Santa Fe State CA Zip Code 92067

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

Name of Employer Carol Wilson, CPA Occupation CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1625.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2012

**Transaction ID : SA11AI.6076**

Amount of Each Receipt this Period  
500.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
27473.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2012

**Transaction ID : SA11AI.6076.0**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

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

Mailing Address 5025 Linea Del Cielo

City Rancho Santa Fe State CA Zip Code 92067

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

Name of Employer Martin Wilson, Real Estate Occupation Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2012

**Transaction ID : SA11AI.6077**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
27973.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 08 / 2012

**Transaction ID : SA11AI.6077.0**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

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

Mailing Address 748 Requeza Street

City State Zip Code  
Encinitas CA 92024

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

Name of Employer Occupation  
None Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
249.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 06 / 2012

**Transaction ID : SA11AI.6055**

Amount of Each Receipt this Period  
100.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25793.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 06 / 2012

**Transaction ID : SA11AI.6055.0**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

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

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

100.00

24940.00

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

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

FOR LINE NUMBER: PAGE 51 OF 85  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Democratic Club of Carlsbad-Oceanside**

Mailing Address P. O. Box 871

City Oceanside State AA Zip Code 92049

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
999.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 01 / 2012

**Transaction ID : SA11C.5186**

Amount of Each Receipt this Period  
499.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL NURSES UNITED PAC - A FUND FOR A HEALTHY AMERICA**

Mailing Address 8630 FENTON STREET, SUITE 1100

City SILVER SPRING State MD Zip Code 20910

FEC ID number of contributing federal political committee. **C** C00446237

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11C.5843**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**NORTH COUNTY UNITY**

Mailing Address 1531 GRAND AVENUE SUITE D

City SAN MARCOS State CA Zip Code 92078

FEC ID number of contributing federal political committee. **C** C00382861

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 09 / 2012

**Transaction ID : SA11C.5551**

Amount of Each Receipt this Period  
1000.00

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

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

2499.00

2499.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 85
	<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)  
**Tetalman for Congress**

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

Mailing Address 4017 Isle Drive

City Carlsbad State CA Zip Code 92008

FEC ID number of contributing federal political committee. **C H2CA49218**

Name of Employer Progressive Realty Occupation Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**13000.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**08 / 16 / 2012**

**Transaction ID : SA13A.6590**

Amount of Each Receipt this Period  
**8000.00**

Candidate Loan

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**8000.00**

**8000.00**

**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 53 OF 85	
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Act Blue Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period 3.95
City Cambridge	State MA Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fees	Category/Type	<b>Transaction ID : SB17.5165</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Act Blue Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2012
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period 7.33
City Cambridge	State MA Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fees	Category/Type 001	<b>Transaction ID : SB17.5215</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Act Blue Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2012
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period 39.35
City Cambridge	State MA Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fees	Category/Type 001	<b>Transaction ID : SB17.5214</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	50.63
<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 54 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial)  
**A. Act Blue Technologies**

Mailing Address 14 Arrow Street  
Suite 11

City Cambridge State MA Zip Code 02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
07 / 29 / 2012

Amount of Each Disbursement this Period  
48.23

Transaction ID : SB17.5603

Category/Type

Full Name (Last, First, Middle Initial)  
**B. Act Blue Technologies**

Mailing Address 14 Arrow Street  
Suite 11

City Cambridge State MA Zip Code 02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
08 / 05 / 2012

Amount of Each Disbursement this Period  
20.97

Transaction ID : SB17.5539

Category/Type

Full Name (Last, First, Middle Initial)  
**c. Act Blue Technologies**

Mailing Address 14 Arrow Street  
Suite 11

City Cambridge State MA Zip Code 02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
08 / 12 / 2012

Amount of Each Disbursement this Period  
161.98

Transaction ID : SB17.5430

Category/Type  
001

**SUBTOTAL** of Disbursements This Page (optional)..... 231.18

**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 55 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Act Blue Technologies</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2012
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period 153.94 <b>Transaction ID : SB17.5431</b>
City Cambridge	State MA Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Act Blue Technologies</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2012
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period 53.61 <b>Transaction ID : SB17.6233</b>
City Cambridge	State MA Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Act Blue Technologies</b>		Date of Disbursement MM / DD / YYYY 09 / 03 / 2012
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period 142.43 <b>Transaction ID : SB17.5932</b>
City Cambridge	State MA Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	349.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 85			
	<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)  
**Tetalman for Congress**

**A. Act Blue Technologies**

Full Name (Last, First, Middle Initial)  
Mailing Address 14 Arrow Street Suite 11  
City Cambridge State MA Zip Code 02138  
Purpose of Disbursement Credit Card Processing Fees  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)  
State: District:

Date of Disbursement: 09 / 09 / 2012  
Amount of Each Disbursement this Period: 129.22  
Transaction ID : SB17.6034  
Category/Type: 001

**B. Act Blue Technologies**

Full Name (Last, First, Middle Initial)  
Mailing Address 14 Arrow Street Suite 11  
City Cambridge State MA Zip Code 02138  
Purpose of Disbursement Credit Card Processing Fees  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)  
State: District:

Date of Disbursement: 09 / 16 / 2012  
Amount of Each Disbursement this Period: 99.21  
Transaction ID : SB17.5817  
Category/Type: 001

**c. Act Blue Technologies**

Full Name (Last, First, Middle Initial)  
Mailing Address 14 Arrow Street Suite 11  
City Cambridge State MA Zip Code 02138  
Purpose of Disbursement Credit Card Processing Fees  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)  
State: District:

Date of Disbursement: 09 / 23 / 2012  
Amount of Each Disbursement this Period: 103.19  
Transaction ID : SB17.6358  
Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... 331.62  
**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 57 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Act Blue Technologies</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2012
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period 261.10 <b>Transaction ID : SB17.6357</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Processing Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Hannah Bingham</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2012
Mailing Address 1242 Turquoise Street		Amount of Each Disbursement this Period 450.00 <b>Transaction ID : SB17.5491</b>
City San Diego	State CA	
Zip Code 92109	Purpose of Disbursement Fundraising Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Hannah Bingham</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2012
Mailing Address 1242 Turquoise Street		Amount of Each Disbursement this Period 1095.00 <b>Transaction ID : SB17.5570</b>
City San Diego	State CA	
Zip Code 92109	Purpose of Disbursement Fundraising Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1806.10
<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 58 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hannah Bingham</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012	
Mailing Address 1242 Turquoise Street			Amount of Each Disbursement this Period 810.00	
City San Diego	State CA	Zip Code 92109	Transaction ID : <b>SB17.5626</b>	
Purpose of Disbursement Fundraising Fees		003 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Hannah Bingham</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2012	
Mailing Address 1242 Turquoise Street			Amount of Each Disbursement this Period 255.00	
City San Diego	State CA	Zip Code 92109	Transaction ID : <b>SB17.5707</b>	
Purpose of Disbursement Fundraising Fees		003 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Hannah Bingham</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012	
Mailing Address 1242 Turquoise Street			Amount of Each Disbursement this Period 780.00	
City San Diego	State CA	Zip Code 92109	Transaction ID : <b>SB17.5710</b>	
Purpose of Disbursement Fundraising Fees		003 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1845.00
<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 59 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. California Premier Printing</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2012
Mailing Address 2173 Salk Avenue Suite 250			Amount of Each Disbursement this Period 170.24
City Carlsbad	State CA	Zip Code 92008	
Purpose of Disbursement Printing	Candidate Name		<b>Transaction ID : SB17.5019</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <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>B. California Premier Printing</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2012
Mailing Address 2173 Salk Avenue Suite 250			Amount of Each Disbursement this Period 265.70
City Carlsbad	State CA	Zip Code 92008	
Purpose of Disbursement Printing	Candidate Name		<b>Transaction ID : SB17.5020</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 001		

Full Name (Last, First, Middle Initial) <b>C. California Premier Printing</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 2173 Salk Avenue Suite 250			Amount of Each Disbursement this Period 80.81
City Carlsbad	State CA	Zip Code 92008	
Purpose of Disbursement Printing	Candidate Name		<b>Transaction ID : SB17.5494</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 001		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	516.75
<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 60 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. California Premier Printing</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2012
Mailing Address 2173 Salk Avenue Suite 250		Amount of Each Disbursement this Period 274.76 <b>Transaction ID : SB17.5496</b>
City Carlsbad	State CA	
Zip Code 92008	Purpose of Disbursement Printing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. California Premier Printing</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2012
Mailing Address 2173 Salk Avenue Suite 250		Amount of Each Disbursement this Period 4934.95 <b>Transaction ID : SB17.5498</b>
City Carlsbad	State CA	
Zip Code 92008	Purpose of Disbursement Yard Signs	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. California Premier Printing</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2012
Mailing Address 2173 Salk Avenue Suite 250		Amount of Each Disbursement this Period 574.70 <b>Transaction ID : SB17.5654</b>
City Carlsbad	State CA	
Zip Code 92008	Purpose of Disbursement Robo Calls	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5784.41
<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 61 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. California Premier Printing</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address 2173 Salk Avenue Suite 250			Amount of Each Disbursement this Period 98.05
City Carlsbad	State CA	Zip Code 92008	Transaction ID : SB17.5656
Purpose of Disbursement Printing	Category/ Type 001		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. California Premier Printing</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 2173 Salk Avenue Suite 250			Amount of Each Disbursement this Period 273.77
City Carlsbad	State CA	Zip Code 92008	Transaction ID : SB17.5704
Purpose of Disbursement Robo Calls	Category/ Type 004		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. California Property Brokers, LTD</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012
Mailing Address 3324 Seacrest Drive			Amount of Each Disbursement this Period 1050.00
City Carlsbad	State CA	Zip Code 92008	Transaction ID : SB17.5324
Purpose of Disbursement Office Rent	Category/ Type 001		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1421.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. California Property Brokers, LTD</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address 3324 Seacrest Drive		Amount of Each Disbursement this Period 52.00 <b>Transaction ID : SB17.5493</b>
City Carlsbad	State CA	
Zip Code 92008	Purpose of Disbursement Office Utilities	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. California Property Brokers, LTD</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2012
Mailing Address 3324 Seacrest Drive		Amount of Each Disbursement this Period 1050.00 <b>Transaction ID : SB17.5566</b>
City Carlsbad	State CA	
Zip Code 92008	Purpose of Disbursement Office Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Carlsbad City Library</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2012
Mailing Address 1775 Dove Lane		Amount of Each Disbursement this Period 220.00 <b>Transaction ID : SB17.5486</b>
City Carlsbad	State CA	
Zip Code 92011	Purpose of Disbursement Fundraising Venue Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1322.00
<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 63 OF 85	
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. City of Carlsbad</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address 1775 Dove Lane		Amount of Each Disbursement this Period 257.00 <b>Transaction ID : SB17.5647</b>
City Carlsbad	State CA	
Zip Code 92011	Purpose of Disbursement Yard Sign Permit Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. City of San Clemente</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address 100 Avenida Persidio		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.5645</b>
City San Clemente	State CA	
Zip Code 92672	Purpose of Disbursement Fundraising Venue Rental	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. City of San Clemente</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address 100 Avenida Persidio		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5696</b>
City San Clemente	State CA	
Zip Code 92672	Purpose of Disbursement Venue Rental	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	607.00
<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 64 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. COPS Voter Guide</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address 705-2 E Bidwell Street # 370		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : SB17.5687</b>
City Folxome	State AA	
Purpose of Disbursement Voter Guide	Category/ Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. County of San Diego</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012
Mailing Address 1600 Pacific Highway		Amount of Each Disbursement this Period 290.93 <b>Transaction ID : SB17.5328</b>
City San Diego	State AA	
Purpose of Disbursement Voter Information	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Charles Dodson</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012
Mailing Address 2315 Via Francisca Unit M		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.5166</b>
City Carlsbad	State CA	
Purpose of Disbursement Campaign Management Fees	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1540.93
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 85		
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Charles Dodson</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2012
Mailing Address 2315 Via Francisca Unit M		Amount of Each Disbursement this Period 900.00 <b>Transaction ID : SB17.5568</b>
City Carlsbad	State CA	
Zip Code 92008	Purpose of Disbursement Campaign Management Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Charles Dodson</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2012
Mailing Address 2315 Via Francisca Unit M		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.5620</b>
City Carlsbad	State CA	
Zip Code 92008	Purpose of Disbursement Campaign Management Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Charles Dodson</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2012
Mailing Address 2315 Via Francisca Unit M		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : SB17.5625</b>
City Carlsbad	State CA	
Zip Code 92008	Purpose of Disbursement Campaign Management Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2600.00
<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 66 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Charles Dodson</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012	
Mailing Address 2315 Via Francisca Unit M			Amount of Each Disbursement this Period 1000.00	
City Carlsbad	State CA	Zip Code 92008	Transaction ID : SB17.5624	
Purpose of Disbursement Campaign Management Fees		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Charles Dodson</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012	
Mailing Address 2315 Via Francisca Unit M			Amount of Each Disbursement this Period 1000.00	
City Carlsbad	State CA	Zip Code 92008	Transaction ID : SB17.5708	
Purpose of Disbursement Campaign Management		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Expression Unlimited</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012	
Mailing Address 5980 Drawbridge Lane 230			Amount of Each Disbursement this Period 425.00	
City San Diego	State CA	Zip Code 92115	Transaction ID : SB17.5015	
Purpose of Disbursement Photography		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2425.00
<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 67 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Brett Fisher</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012
Mailing Address 120 Village Run East		Amount of Each Disbursement this Period 229.20 <b>Transaction ID : SB17.5325</b>
City Encinitas	State CA Zip Code 92024	
Purpose of Disbursement Fundraising Services	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fork Films</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2012
Mailing Address 79 Fifth Avenue		Amount of Each Disbursement this Period 295.00 <b>Transaction ID : SB17.6130</b>
City New York	State NY Zip Code 10003	
Purpose of Disbursement Fundraising Event Film	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Justice Voter Guide</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address P.O. Box 88197		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.5689</b>
City Los Angeles	State CA Zip Code 90009	
Purpose of Disbursement Voter Guide	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1024.20
<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 68 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sheila Kadah</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012	
Mailing Address 5301 Village Drive			Amount of Each Disbursement this Period 151.39	
City Oceanside	State CA	Zip Code 92057	Transaction ID : SB17.5159	
Purpose of Disbursement Fundraising Fees		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Sheila Kadah</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012	
Mailing Address 5301 Village Drive			Amount of Each Disbursement this Period 73.00	
City Oceanside	State CA	Zip Code 92057	Transaction ID : SB17.5331	
Purpose of Disbursement Fundraising Fees		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Sheila Kadah</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2012	
Mailing Address 5301 Village Drive			Amount of Each Disbursement this Period 943.37	
City Oceanside	State CA	Zip Code 92057	Transaction ID : SB17.5490	
Purpose of Disbursement Fundraising Fees		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1167.76
<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 69 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sheila Kadah</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address 5301 Village Drive		Amount of Each Disbursement this Period 243.57 <b>Transaction ID : SB17.5649</b>
City Oceanside	State CA	
Purpose of Disbursement Fundraising Fees		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Molly Kelly</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 1968 Riviera Drive		Amount of Each Disbursement this Period 318.21 <b>Transaction ID : SB17.5158</b>
City Vista	State CA	
Purpose of Disbursement Fundraising Fees		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. Molly Kelly</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012
Mailing Address 1968 Riviera Drive		Amount of Each Disbursement this Period 192.11 <b>Transaction ID : SB17.5327</b>
City Vista	State CA	
Purpose of Disbursement Fundraising Fees		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	753.89
<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 70 OF 85	
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Molly Kelly</b>			Date of Disbursement MM / DD / YYYY 08 / 22 / 2012	
Mailing Address 1968 Riviera Drive			Amount of Each Disbursement this Period 822.63	
City Vista	State CA	Zip Code 92084	Transaction ID : SB17.5485	
Purpose of Disbursement Fundraising Fees		Category/Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Molly Kelly</b>			Date of Disbursement MM / DD / YYYY 09 / 17 / 2012	
Mailing Address 1968 Riviera Drive			Amount of Each Disbursement this Period 435.71	
City Vista	State CA	Zip Code 92084	Transaction ID : SB17.5651	
Purpose of Disbursement Fundraising Fees		Category/Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Alex Kiwan</b>			Date of Disbursement MM / DD / YYYY 08 / 22 / 2012	
Mailing Address 3560 Copper Crest Road			Amount of Each Disbursement this Period 167.00	
City Encinitas	State CA	Zip Code 92024	Transaction ID : SB17.5488	
Purpose of Disbursement Fundraising Fees		Category/Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1425.34
<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 71 OF 85		
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Alex Kiwan</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address 3560 Copper Crest Road		Amount of Each Disbursement this Period 147.00 <b>Transaction ID : SB17.5569</b>
City Encinitas State CA Zip Code 92024	Purpose of Disbursement Fundraising Fees Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Laurie Marrelli</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address 12229 Carmel Vista Road		Amount of Each Disbursement this Period 655.00 <b>Transaction ID : SB17.5691</b>
City San Diego State CA Zip Code 92130	Purpose of Disbursement Website Services Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Martinez &amp; Associates, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012
Mailing Address 1531 Grand Avenue Suite D		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.5323</b>
City San Marcos State CA Zip Code 92078	Purpose of Disbursement Professional Treasurer Services Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1802.00
<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 72 OF 85	
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Martinez &amp; Associates, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012
Mailing Address 1531 Grand Avenue Suite D		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.6593</b>
City San Marcos State CA Zip Code 92078	Purpose of Disbursement Professional Treasurer Services Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. NGP Van</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 1101 15th Street NW #500		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : SB17.6254</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement Computer Software Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Orange County Registrar of Voters</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address 1300 S Grand Avenue Suite C		Amount of Each Disbursement this Period 1446.00 <b>Transaction ID : SB17.5212</b>
City Santa Ana State CA Zip Code 92705	Purpose of Disbursement Ballot Fees Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2996.00
<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 73 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pacific Sales</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address 2110 Vista Way		Amount of Each Disbursement this Period 237.04 <b>Transaction ID : SB17.5630</b>
City Oceanside	State CA	
Zip Code 92054	Purpose of Disbursement Office Equipment - Refrigerator	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. SAN DIEGO COUNTY DEMOCRATIC PARTY (FED. ACCT.)</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2012
Mailing Address 8340 CLAIREMONT MESA BOULEVARD SUITE 105		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.6121</b>
City SAN DIEGO	State CA	
Zip Code 92111	Purpose of Disbursement Event Registration Fees	Category/ Type 011
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. SAN DIEGO COUNTY DEMOCRATIC PARTY (FED. ACCT.)</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address 8340 CLAIREMONT MESA BOULEVARD SUITE 105		Amount of Each Disbursement this Period 64.00 <b>Transaction ID : SB17.5629</b>
City SAN DIEGO	State CA	
Zip Code 92111	Purpose of Disbursement Election Material	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	351.04
<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 74 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. San Diego County Registrar of Voters</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address 5201 Ruffin Road			Amount of Each Disbursement this Period 1382.00
City San Diego	State CA	Zip Code 92123	
Purpose of Disbursement Ballot Fees		Category/ Type	<b>Transaction ID : SB17.5213</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Morgan Simpson</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address P.O. Box 82302			Amount of Each Disbursement this Period 848.25
City San Diego	State CA	Zip Code 92138	
Purpose of Disbursement Fundraising Fees		Category/ Type	<b>Transaction ID : SB17.5709</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 07 / 09 / 2012
Mailing Address 2150 Vista Way			Amount of Each Disbursement this Period 36.05
City Oceanside	State CA	Zip Code 92054	
Purpose of Disbursement Name Badges and Cards		Category/ Type	<b>Transaction ID : SB17.5161</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2266.30
<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 75 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2012
Mailing Address 2150 Vista Way		Amount of Each Disbursement this Period 103.40 <b>Transaction ID : SB17.5160</b>
City Oceanside	State CA	
Purpose of Disbursement Printer Ink		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 07 / 22 / 2012
Mailing Address 2150 Vista Way		Amount of Each Disbursement this Period 67.83 <b>Transaction ID : SB17.5313</b>
City Oceanside	State CA	
Purpose of Disbursement Paper and Envelopes		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 07 / 30 / 2012
Mailing Address 2150 Vista Way		Amount of Each Disbursement this Period 210.37 <b>Transaction ID : SB17.6595</b>
City Oceanside	State CA	
Purpose of Disbursement Ink, Paper, Copies		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	381.60
<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 76 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2012
Mailing Address 2150 Vista Way		Amount of Each Disbursement this Period 219.30 <b>Transaction ID : SB17.6596</b>
City Oceanside	State CA	
Zip Code 92054	Purpose of Disbursement Ink, Paper, Copies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2012
Mailing Address 2150 Vista Way		Amount of Each Disbursement this Period 58.01 <b>Transaction ID : SB17.6597</b>
City Oceanside	State CA	
Zip Code 92054	Purpose of Disbursement Copies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2012
Mailing Address 2150 Vista Way		Amount of Each Disbursement this Period 33.90 <b>Transaction ID : SB17.6122</b>
City Oceanside	State CA	
Zip Code 92054	Purpose of Disbursement Ink	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	219.03
<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 77 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2012
Mailing Address 2150 Vista Way		Amount of Each Disbursement this Period 45.00
City Oceanside	State CA	
Zip Code 92054	Purpose of Disbursement Stamps	<b>Transaction ID : SB17.6124</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2012
Mailing Address 2150 Vista Way		Amount of Each Disbursement this Period 21.53
City Oceanside	State CA	
Zip Code 92054	Purpose of Disbursement Cards	<b>Transaction ID : SB17.5632</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement MM / DD / YYYY 09 / 10 / 2012
Mailing Address 2150 Vista Way		Amount of Each Disbursement this Period 146.57
City Oceanside	State CA	
Zip Code 92054	Purpose of Disbursement Ink, Name Badges	<b>Transaction ID : SB17.5633</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	213.10
<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 78 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 2150 Vista Way		Amount of Each Disbursement this Period 100.15 <b>Transaction ID : SB17.5694</b>
City Oceanside	State CA	
Zip Code 92054	Purpose of Disbursement Printer Ink	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2012
Mailing Address 2150 Vista Way		Amount of Each Disbursement this Period 108.23 <b>Transaction ID : SB17.5693</b>
City Oceanside	State CA	
Zip Code 92054	Purpose of Disbursement Printer Ink	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 2150 Vista Way		Amount of Each Disbursement this Period 32.29 <b>Transaction ID : SB17.6278</b>
City Oceanside	State CA	
Zip Code 92054	Purpose of Disbursement Paper	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	240.67
<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 79 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 2772 Roosevelt Street			Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.5211</b>
City Carlsbad	State DE	Zip Code 92008	
Purpose of Disbursement Postage	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address 2772 Roosevelt Street			Amount of Each Disbursement this Period 135.00 <b>Transaction ID : SB17.5628</b>
City Carlsbad	State DE	Zip Code 92008	
Purpose of Disbursement Postage	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. United States Postal Service</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2012
Mailing Address 2772 Roosevelt Street			Amount of Each Disbursement this Period 225.00 <b>Transaction ID : SB17.5695</b>
City Carlsbad	State DE	Zip Code 92008	
Purpose of Disbursement Postage	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	410.00
<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 80 OF 85			
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Voter Guide</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address 6285 E Spring Street Suite 202		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.5685</b>
City Long Beach State CA Zip Code 92078	Purpose of Disbursement Voter Guide Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 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).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	35083.35



**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 81 OF 85	
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. DEMOCRATIC PARTY OF ORANGE COUNTY FED PAC</b>			Date of Disbursement M M / D D / Y Y Y Y <b>09 / 14 / 2012</b>
Mailing Address <b>3700 WILSHIRE BLVD., STE.1050B</b>			Amount of Each Disbursement this Period <b>150.00</b> <b>Transaction ID : SB21.6267</b>
City <b>LOS ANGELES</b>	State <b>CA</b>	Zip Code <b>90010</b>	
Purpose of Disbursement <b>Fundraising Event</b>		Category/ Type <b>011</b>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y
Mailing Address			Amount of Each Disbursement this Period
City	State	Zip Code	
Purpose of Disbursement		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y
Mailing Address			Amount of Each Disbursement this Period
City	State	Zip Code	
Purpose of Disbursement		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>150.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>150.00</b>

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

NAME OF COMMITTEE (In Full) **Tetalman for Congress** Transaction ID : **SC/10.4100**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **Jerry Tetalman** *[PERSONAL FUNDS]* Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 4017 Isle Drive

City State ZIP Code  
 Carlsbad CA 92008

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

**TERMS**

Date Incurred M 08 / D 22 / Y 2011	Date Due M / D / Y 12/31/2012	Interest Rate 0.00 % (apr)	Secured: <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).....	▶	[ ]

**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)  
**Tetalman for Congress**

Transaction ID : **SC/10.6590**

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

**Jerry Tetalman**

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
4017 Isle Drive

City State ZIP Code  
Carlsbad CA 92008

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
8000.00	0.00	8000.00

**TERMS**

Date Incurred: M 08 / D 16 / Y 2012  
 Date Due: M / D / Y 11/30/12  
 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	8000.00
<b>TOTALS</b> This Period (last page in this line only).....	13000.00

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

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>AT&amp;T</b>	Nature of Debt (Purpose): Telephone Service
Mailing Address P.O. Box 5014	
City State Zip Code Carol Stream IL 60197	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.6030</b>	
Amount Incurred This Period 40.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 40.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>California Premier Printing</b>	Nature of Debt (Purpose): Printing
Mailing Address 2173 Salk Avenue Suite 250	
City State Zip Code Carlsbad CA 92008	

Outstanding Balance Beginning This Period 170.24	<b>Transaction ID : SD10.5017</b>	
Amount Incurred This Period 0.00	Payment This Period 170.24	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Charles Dodson</b>	Nature of Debt (Purpose): Campaign Management Services
Mailing Address 2315 Via Francisca Unit M	
City State Zip Code Carlsbad CA 92008	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.5973</b>	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	540.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Tetalman for Congress**

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

**Chelsea Stipek**

Nature of Debt (Purpose):  
Fundraising Fees

Mailing Address 4727 Mayflower Way

City State Zip Code  
Oceanside CA 92057

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5974

Amount Incurred This Period

112.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

112.50

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

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) .....

112.50

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

652.50

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

13000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

13652.50