SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full): SANTA BARBARA WOMEN'S Political Committee

FEC IDENTIFICATION NUMBER ▼ C00429456

Check if ☐ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle Initial) of Payee: Santa Barbara Independent
Mailing Address: 122 W. Figueroa St.
City: Santa Barbara State: CA Zip Code: 93101
Date: 10 26 2006
Amount: 18.52
Purpose of Expenditure: Advertising
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President State: CA District: 23
Name of Federal Candidate Supported or Opposed by Expenditure: Lois CAPPS - Supported
Check One: ☒ Support ☐ Oppose
Calendar Year-To-Date Per Election for Office Sought:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee: DAILY NEXUS
Mailing Address: P.O. BOX 13402 UCEN
City: SANTA BARBARA State: CA Zip Code: 93107
Date: 10 27 2006
Amount: 6.11
Purpose of Expenditure: Advertising
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President State: CA District: 23
Name of Federal Candidate Supported or Opposed by Expenditure: LOIS CAPPS Supported
Check One: ☒ Support ☐ Oppose
Calendar Year-To-Date Per Election for Office Sought:
Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 0.

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶ 24.63

(c) **TOTAL** Independent Expenditures ▶ 0.

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature

Date 12 05 2006