

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

ADDRESS (number and street) 1707 L Street, NW  
Suite 750  
 Check if different than previously reported. (ACC)  
Washington DC 20036

2. **FEC IDENTIFICATION NUMBER** C00332296  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2010 through 07 31 2010

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 Frank Cannon

Signature of Treasurer Electronically Filed by Frank Cannon Date 08 20 2010

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 3X** (Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		28479.29
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	42631.48									
(c) Total Receipts (from Line 19) .....	70432.22	173206.25								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	113063.70	201685.54								
7. Total Disbursements (from Line 31) .....	28443.76	117065.60								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	84619.94	84619.94								
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) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	45012.61	94751.08
(ii) Unitemized .....	25419.61	77455.17
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	70432.22	172206.25
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	70432.22	173206.25
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	70432.22	173206.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	70432.22	173206.25

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1190.14	6896.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1190.14	6896.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	27253.62	104221.09
24. Independent Expenditure (use Schedule E) .....	0.00	3948.18
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	2000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	28443.76	117065.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28443.76	117065.60

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	70432.22	173206.25
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	70432.22	173206.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1190.14	6896.33
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1190.14	6896.33

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 344
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Joanne M. Aarseth	Date of Receipt MM / DD / YYYY 07 / 06 / 2010
	Mailing Address 20840 Miranda Falls Sq	<b>Transaction ID:</b> 1F91AB8A26AA76FF7B0
	City State Zip Code Sterling VA 20165-2482	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
	Name of Employer Occupation Freddie Mac Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Joanne M. Aarseth	Date of Receipt MM / DD / YYYY 07 / 06 / 2010
	Mailing Address 20840 Miranda Falls Sq	<b>Transaction ID:</b> A79E886A71BD57F770E
	City State Zip Code Sterling VA 20165-2482	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Freddie Mac Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jhony Acosta	Date of Receipt MM / DD / YYYY 07 / 07 / 2010
	Mailing Address 2733 Sandwood St	<b>Transaction ID:</b> 122B655A98470CAB90D
	City State Zip Code Lakewood CA 90712-3323	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation La Country Finance Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 140.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	135.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 8 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Jhony Acosta  
Mailing Address 2733 Sandwood St  
City Lakewood State CA Zip Code 90712-3323  
FEC ID number of contributing federal political committee. **C**  
Name of Employer La Country Occupation Finance Manager  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 140.00  
Date of Receipt 07 / 07 / 2010  
Transaction ID: 91F4861449FD2B1AE69  
Amount of Each Receipt this Period 35.00  
Earmarked for Carly for California Inc

**B.** Full Name (Last, First, Middle Initial)  
Jhony Acosta  
Mailing Address 2733 Sandwood St  
City Lakewood State CA Zip Code 90712-3323  
FEC ID number of contributing federal political committee. **C**  
Name of Employer La Country Occupation Finance Manager  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 140.00  
Date of Receipt 07 / 07 / 2010  
Transaction ID: C10B5E0C28404A67E2A  
Amount of Each Receipt this Period 35.00  
Earmarked for Kinzinger for Congress

**C.** Full Name (Last, First, Middle Initial)  
Theresa Adams  
Mailing Address 1302 Gibson Rd  
City Bensalem State PA Zip Code 19020-7411  
FEC ID number of contributing federal political committee. **C**  
Name of Employer info requested Occupation info requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 15.00  
Date of Receipt 07 / 12 / 2010  
Transaction ID: EF39680363EA771F88E  
Amount of Each Receipt this Period 15.00  
Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 85.00  
**TOTAL** This Period (last page this line number only) ..... ►



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jill Allen</p> <p>Mailing Address 6025 Beecher Rd</p> <p>City State Zip Code Flint MI 48532-2002</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer housewife      Occupation housewife</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">85.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">21</span> / <span style="border: 1px solid black; padding: 2px;">2010</span></p> <p><b>Transaction ID:</b> 3A472DF0C54A8530F6D</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">35.00</span></p> <p>Earmarked for Candice Miller for Congress</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Steven Allen</p> <p>Mailing Address 25229 Chimney House Ct</p> <p>City State Zip Code Damascus MD 20872-2358</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer information requested      Occupation information requested</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">20.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">26</span> / <span style="border: 1px solid black; padding: 2px;">2010</span></p> <p><b>Transaction ID:</b> B66FBE13B023F11DE42</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">20.00</span></p> <p><b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Nancy Alvord</p> <p>Mailing Address 4939 NE Laurelcree Ln</p> <p>City State Zip Code Seattle WA 98105-5244</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Retired      Occupation Private Investor</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">5000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">09</span> / <span style="border: 1px solid black; padding: 2px;">2010</span></p> <p><b>Transaction ID:</b> E5A4CFD60D85CBF8969</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">5000.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">5035.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 10 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Nancy Alvord  
Mailing Address 4939 NE Laurelcrest Ln  
City State Zip Code  
Seattle WA 98105-5244  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Private Investor  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 07 / 09 / 2010  
Transaction ID: 442F99DAA246961F329  
Amount of Each Receipt this Period 2400.00  
**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**B.** Full Name (Last, First, Middle Initial)  
Richard Alvord  
Mailing Address 4939 NE Laurelcrest Ln  
City State Zip Code  
Seattle WA 98105-5244  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Private Investor  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 07 / 09 / 2010  
Transaction ID: 0FF76D1F7E954B1610D  
Amount of Each Receipt this Period 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Richard Alvord  
Mailing Address 4939 NE Laurelcrest Ln  
City State Zip Code  
Seattle WA 98105-5244  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Private Investor  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 07 / 09 / 2010  
Transaction ID: 935C980D41F8021CD43  
Amount of Each Receipt this Period 2400.00  
**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 5000.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 11 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Lillian Ammann

Mailing Address 603 Mauze Dr

City

San Antonio

State

TX

Zip Code

78216-3711

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

MM / DD / YYYY  
07 / 08 / 2010

Transaction ID: 706BE92E858CB8AD6F4

Amount of Each Receipt this Period

20.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)

Veronica Anderson

Mailing Address 1325 News Ave

City

Elmont

State

NY

Zip Code

11003-3347

FEC ID number of contributing federal political committee.

**C**

Name of Employer

H. Care Center

Occupation

Registered Nurse

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
07 / 06 / 2010

Transaction ID: 557A32A5E8A230EADE6

Amount of Each Receipt this Period

200.00

[MEMO ITEM]  
Earmarked for Carly for California Inc

**C.**

Full Name (Last, First, Middle Initial)

Veronica Anderson

Mailing Address 1325 News Ave

City

Elmont

State

NY

Zip Code

11003-3347

FEC ID number of contributing federal political committee.

**C**

Name of Employer

H. Care Center

Occupation

Registered Nurse

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
07 / 06 / 2010

Transaction ID: 4952E1B49D93F075E50

Amount of Each Receipt this Period

200.00

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

220.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial) Veronica Anderson		Date of Receipt MM / DD / YYYY 07 / 06 / 2010
Mailing Address 1325 News Ave		Transaction ID: 6D94DCED9F586A2507C
City Elmont	State Zip Code NY 11003-3347	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer H. Care Center	Occupation Registered Nurse	<b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

**B.**

Full Name (Last, First, Middle Initial) Susan Anthony		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
Mailing Address 118 Taulman Ln		Transaction ID: CCBF332A24607DD64A7
City Hamilton	State Zip Code MT 59840-2857	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer USPS	Occupation Rural Mail Carrier	Earmarked for Bachmann for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

**C.**

Full Name (Last, First, Middle Initial) Ben and Claire Aragon		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
Mailing Address 3772 N Cherry Ave		Transaction ID: 87B7D67DC8421589000
City Tucson	State Zip Code AZ 85719-1451	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.00
Name of Employer TMC	Occupation Pt. Relations Analyst	Earmarked for Bachmann for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 34.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	84.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 13 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Dennis Bakke  
Mailing Address 2811 24th St N  
City Arlington State VA Zip Code 22207-4912  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Educator  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt 07 / 09 / 2010  
Transaction ID: 7BE4F1D294E249F68F0  
Amount of Each Receipt this Period 1000.00  
Earmarked for Friends of Sharron Angle

**B.** Full Name (Last, First, Middle Initial)  
Dennis Bakke  
Mailing Address 2811 24th St N  
City Arlington State VA Zip Code 22207-4912  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Educator  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt 07 / 09 / 2010  
Transaction ID: F16BF9CAC088D62B61F  
Amount of Each Receipt this Period 1000.00  
Earmarked for Carly for California Inc

**C.** Full Name (Last, First, Middle Initial)  
G. Joan Baretincic  
Mailing Address 302 Hillview Dr Blue Lake Estates  
City Horseshoe Bay State TX Zip Code 78657-6043  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 25.00  
Date of Receipt 07 / 09 / 2010  
Transaction ID: 08AC9F399D949A65D75  
Amount of Each Receipt this Period 25.00  
Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2025.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Robin R. Barrett

Mailing Address 108 Duke Way

City State Zip Code  
Fairbanks AK 99709-3023

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2010

**Transaction ID:** 77B14DDAA512DE79F65

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)  
Robin R. Barrett

Mailing Address 108 Duke Way

City State Zip Code  
Fairbanks AK 99709-3023

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2010

**Transaction ID:** 88FD85458F664B8CEBC

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**C.**

Full Name (Last, First, Middle Initial)  
William R. Baumel

Mailing Address 18635 Montewood Dr

City State Zip Code  
Saratoga CA 95070-6221

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

Name of Employer info requested Occupation info requested  
RWI Ventures II Venture Capitalist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
07 / 12 / 2010

**Transaction ID:** 1F1BBDDF0C4BC4128F9

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **500.00**

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

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

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

FOR LINE NUMBER: PAGE 15 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen Beach		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
	Mailing Address 937 Pine Hollow Rd		<b>Transaction ID:</b> 4D04E40FF7A8ED1FED9
	City Mount Pleasant	State SC	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer	Occupation	Earmarked for Bachmann for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 85.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Paul Beauregard		Date of Receipt MM / DD / YYYY 07 / 07 / 2010
	Mailing Address 348 Cottonwood Ln		<b>Transaction ID:</b> 3BA09437980BC7EFF9E
	City Saline	State MI	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer retired	Occupation retired	Earmarked for Candice Miller for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Janet Beckley		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
	Mailing Address 7 Brampton Rd		<b>Transaction ID:</b> B9DC71F125C3B0F29FF
	City Malvern	State PA	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer Giant Food Stores	Occupation Bagger	Earmarked for Bachmann for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 45.00		

**SUBTOTAL** of Receipts This Page (optional) ..... ► 125.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 2213 N Sunrise Dr

City State Zip Code  
Round Lake Beach IL 60073-4049

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

Name of Employer none Occupation Chaplain

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 35.00

Date of Receipt 07 / 08 / 2010  
Transaction ID: 8ED72C7F918D38CD5CF  
Amount of Each Receipt this Period 35.00  
Earmarked for Bachmann for Congress

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

Mailing Address 1717 E 23rd St

City State Zip Code  
Farmington NM 87401-4368

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt 07 / 08 / 2010  
Transaction ID: 6F5AA1539405214CE37  
Amount of Each Receipt this Period 50.00  
Earmarked for Bachmann for Congress

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

Mailing Address 13321 California St

City State Zip Code  
Omaha NE 68154-5257

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

Name of Employer York Label Occupation National Account Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 35.00

Date of Receipt 07 / 08 / 2010  
Transaction ID: D3EA361ECF6E5285A30  
Amount of Each Receipt this Period 35.00  
Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 120.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Sonja M. Berthiaume

Mailing Address 726 Lovell Avenue W

City Roseville State MN Zip Code 55113-4520

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

Name of Employer University of Minnesota Medical Center Occupation Medical Laboratory Tech

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 35.00

Date of Receipt 07 / 03 / 2010  
**Transaction ID:** 228CBAC8D02A3B4DEDD  
 Amount of Each Receipt this Period 35.00

Earmarked for Bachmann for Congress

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

Mailing Address 4N557 Crane Ln

City Saint Charles State IL Zip Code 60175-4762

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

Name of Employer Shearer & Agrella Occupation Attorney

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 19 / 2010  
**Transaction ID:** B47587900571608474F  
 Amount of Each Receipt this Period 500.00

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

Mailing Address 8902 Eagle Point Loop Rd SW

City Lakewood State WA Zip Code 98498-1054

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

Name of Employer self Occupation consultant

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 08 / 2010  
**Transaction ID:** 86819216ACE8E83A667  
 Amount of Each Receipt this Period 250.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► **785.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Rebecca Bianco

Mailing Address 8902 Eagle Point Loop Rd SW

City Lakewood State WA Zip Code 98498-1054

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

Name of Employer self Occupation consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 08 / 2010

Transaction ID: CDD2C80CF063FE80DB4

Amount of Each Receipt this Period 500.00

**B.**

Full Name (Last, First, Middle Initial)  
Mary Biggers

Mailing Address PO Box 20315

City Amarillo State TX Zip Code 79114-2315

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt 07 / 26 / 2010

Transaction ID: F130A6CA857B2DC06F1

Amount of Each Receipt this Period 50.00

Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
L. Monty Bippes

Mailing Address 317 E Sharp Ave

City Spokane State WA Zip Code 99202-1835

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

Name of Employer information requested Occupation information requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 13 / 2010

Transaction ID: C5D54F0A3773944DEB8

Amount of Each Receipt this Period 40.00

Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 590.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Judith Black

Mailing Address 13774 County Road 468

City Tyler State TX Zip Code 75704-2934

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 26 / 2010

**Transaction ID:** 9E0686DE528C6C3B1EC

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Bill Blatty

Mailing Address 7018 Longwood Dr

City Bethesda State MD Zip Code 20817-2118

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

Name of Employer self-employed Occupation writer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 08 / 2010

**Transaction ID:** 7F4B58B9F3140B6BC14

Amount of Each Receipt this Period  
100.00

Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Bill Blatty

Mailing Address 7018 Longwood Dr

City Bethesda State MD Zip Code 20817-2118

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

Name of Employer self-employed Occupation writer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 08 / 2010

**Transaction ID:** BD61F1F1AE3CE16F3FB

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **450.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 344
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Bill Blatty	Date of Receipt MM / DD / YYYY 07 / 08 / 2010
	Mailing Address 7018 Longwood Dr	<b>Transaction ID:</b> 0404C42D36115D6A34C
	City State Zip Code Bethesda MD 20817-2118	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer self-employed Occupation writer		Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Leo P. Bohlen	Date of Receipt MM / DD / YYYY 07 / 13 / 2010
	Mailing Address 4602 N 24th St Apt 121	<b>Transaction ID:</b> 5542054810C13EA7DD4
	City State Zip Code Phoenix AZ 85016-5209	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	
Name of Employer information requested Occupation information requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mary Boisvert	Date of Receipt MM / DD / YYYY 07 / 26 / 2010
	Mailing Address 709 S Wacouta Ave	<b>Transaction ID:</b> 1A7494A6271365C2FA4
	City State Zip Code Prairie Du Chien WI 53821-2231	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer info requested Occupation info requested		Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 21 / 344  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Mary Boisvert  
Mailing Address 709 S Wacouta Ave  
City Prairie Du Chien State WI Zip Code 53821-2231  
FEC ID number of contributing federal political committee. **C**  
Name of Employer info requested Occupation info requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: BAC74726AFF6BB993AE  
Amount of Each Receipt this Period 50.00  
Earmarked for Friends of Sharron Angle

**B.** Full Name (Last, First, Middle Initial)  
Michael Boldrick  
Mailing Address 4375 Coachman Way  
City Santa Maria State CA Zip Code 93455-3627  
FEC ID number of contributing federal political committee. **C**  
Name of Employer self Occupation housewife  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 35.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: 72552951DAEF4D9085A  
Amount of Each Receipt this Period 35.00  
Earmarked for Bachmann for Congress

**C.** Full Name (Last, First, Middle Initial)  
Dennis Bonilla  
Mailing Address 230 W Dahil Rd  
City Tucson State AZ Zip Code 85705-4428  
FEC ID number of contributing federal political committee. **C**  
Name of Employer pima community college Occupation lab spec  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 24.00  
Date of Receipt 07 / 09 / 2010  
Transaction ID: 392D39407F41E9EB69A  
Amount of Each Receipt this Period 12.00  
Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 97.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 344
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) James Boushor		Date of Receipt MM / DD / YYYY 07 / 02 / 2010
	Mailing Address 42 Ross St		<b>Transaction ID:</b> A30EB211F326C6F41AD
	City Clark	State NJ	Zip Code 07066-2630
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer info requested	Occupation info requested	<b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) James Boushor		Date of Receipt MM / DD / YYYY 07 / 02 / 2010
	Mailing Address 42 Ross St		<b>Transaction ID:</b> 4D60932AEE16B01B53D
	City Clark	State NJ	Zip Code 07066-2630
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer info requested	Occupation info requested	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Barbara J. Bowler		Date of Receipt MM / DD / YYYY 07 / 13 / 2010
	Mailing Address 3532 Lime Tree Ct		<b>Transaction ID:</b> 8EDCA3F83790A4CAB68
	City Walnut Creek	State CA	Zip Code 94598-2724
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer None	Occupation Homemaker	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 80.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 23 / 344  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 3206 N Christmas Ave

City Tucson State AZ Zip Code 85716-1102

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

Name of Employer  
Tucson Unified School District  
Occupation  
Teacher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 08 / 2010

**Transaction ID:** FF131CEBE3EFF03F713

Amount of Each Receipt this Period  
25.00

Earmarked for Bachmann for Congress

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

Mailing Address 3369 Stage Coach Dr

City Lafayette State CA Zip Code 94549-1824

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

Name of Employer information requested  
Occupation information requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 13 / 2010

**Transaction ID:** 86B0551F8299D8E3FB9

Amount of Each Receipt this Period  
25.00

Earmarked for Carly for California Inc

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

Mailing Address 7010 Erica Cir

City West Hills State CA Zip Code 91307-1318

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 75.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 09 / 2010

**Transaction ID:** 4D70DD51897E6C2B7A7

Amount of Each Receipt this Period  
25.00

Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ► 75.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Lynda Bracken

Mailing Address 7010 Erica Cir

City State Zip Code  
West Hills CA 91307-1318

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 75.00

Date of Receipt

MM / DD / YYYY  
07 / 09 / 2010

Transaction ID: 65A39A53F3695F9C1EA

Amount of Each Receipt this Period

25.00

Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)

George R. (Bob) R. Bramer

Mailing Address 1911 Creekwood Dr

City State Zip Code  
South Bend IN 46635-2055

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

Name of Employer none Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 75.00

Date of Receipt

MM / DD / YYYY  
07 / 08 / 2010

Transaction ID: BA4989E1CAA4006BEA7

Amount of Each Receipt this Period

50.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)

Mary Breaux

Mailing Address PO Box 504

City State Zip Code  
Clinton LA 70722-0504

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

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00

Date of Receipt

MM / DD / YYYY  
07 / 08 / 2010

Transaction ID: ACA50A44A439CB9DF83

Amount of Each Receipt this Period

50.00

Earmarked for Bachmann for Congress

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

125.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Gregory J. Brewer

Mailing Address 2208 Heather Mill Ct

City Springfield State IL Zip Code 62704-6500

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

Name of Employer Self-Employed Occupation Music Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 07 / 26 / 2010

**Transaction ID:** 4E16759A7031D588A6B

Amount of Each Receipt this Period 50.00

Earmarked for Friends of Sharron Angle

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

Mailing Address 2208 Heather Mill Ct

City Springfield State IL Zip Code 62704-6500

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

Name of Employer Self-Employed Occupation Music Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 07 / 27 / 2010

**Transaction ID:** 46DCD7EE92D0F0B5DEF

Amount of Each Receipt this Period 1000.00

Earmarked for Friends of Sharron Angle

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

Mailing Address 109 48th St

City Virginia Beach State VA Zip Code 23451-2405

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

Name of Employer Occupation Retired educator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt 07 / 12 / 2010

**Transaction ID:** A590B3F50F2ED67E15D

Amount of Each Receipt this Period 25.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1075.00**

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

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

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

FOR LINE NUMBER: PAGE 26 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Katarzyna Buchen  
Mailing Address 58 Tanners Neck Ln  
City Westhampton State NY Zip Code 11977-1429  
FEC ID number of contributing federal political committee. **C**  
Name of Employer self Occupation self  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 70.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: 494268A1E306BD132A8  
Amount of Each Receipt this Period 35.00  
Earmarked for Bachmann for Congress

**B.** Full Name (Last, First, Middle Initial)  
Steven C. Bulack  
Mailing Address 920 S 48th St  
City Philadelphia State PA Zip Code 19143-3527  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Inc Occupation Senior Developer (Software)  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 165.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: A61EF5759FAD9F6F056  
Amount of Each Receipt this Period 25.00  
Earmarked for Bachmann for Congress

**C.** Full Name (Last, First, Middle Initial)  
Thomas Burdick  
Mailing Address 31579 Vintners Pointe Ct  
C/O Blessed Theresa of Calcutta Pa  
City Winchester State CA Zip Code 92596-8318  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Diocese of San Bernardino Occupation Catholic Priest  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00  
Date of Receipt 07 / 19 / 2010  
Transaction ID: F3E1DB41A6AABD1072D  
Amount of Each Receipt this Period 100.00  
Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 160.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 27 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 31579 Vintners Pointe Ct  
C/O Blessed Theresa of Calcutta Pa

City Winchester State CA Zip Code 92596-8318

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

Name of Employer Diocese of San Bernardino Occupation Catholic Priest

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 19 / 2010  
Transaction ID: 68466ED475982529509  
Amount of Each Receipt this Period 100.00

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

Mailing Address 31579 Vintners Pointe Ct  
C/O Blessed Theresa of Calcutta Pa

City Winchester State CA Zip Code 92596-8318

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

Name of Employer Diocese of San Bernardino Occupation Catholic Priest

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 19 / 2010  
Transaction ID: ED8165E4388CC36B855  
Amount of Each Receipt this Period 100.00  
Earmarked for Carly for California Inc

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

Mailing Address 312 S Columbia Center Blvd  
Unit 11

City Kennewick State WA Zip Code 99336-9547

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 26 / 2010  
Transaction ID: F72FF10D8295D8C95F6  
Amount of Each Receipt this Period 50.00  
Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 250.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial) Douglas Burke		Date of Receipt MM / DD / YYYY 07 / 26 / 2010
Mailing Address 312 S Columbia Center Blvd Unit 11		<b>Transaction ID:</b> BF800C66A76D1D34E59
City Kennewick	State Zip Code WA 99336-9547	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer info requested	Occupation info requested	Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

**B.**

Full Name (Last, First, Middle Initial) Eugene Burke		Date of Receipt MM / DD / YYYY 07 / 13 / 2010
Mailing Address 14155 Creekwood Ct		<b>Transaction ID:</b> 72CCC70C1D27851E40B
City Elm Grove	State Zip Code WI 53122-1143	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Information requested	Occupation Information requested	Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00	

**C.**

Full Name (Last, First, Middle Initial) Eugene Burke		Date of Receipt MM / DD / YYYY 07 / 13 / 2010
Mailing Address 14155 Creekwood Ct		<b>Transaction ID:</b> 1A7CC065436CADAC470
City Elm Grove	State Zip Code WI 53122-1143	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Information requested	Occupation Information requested	Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	125.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Stephen Bussa

Mailing Address 726 Morley Ct

City Dearborn State MI Zip Code 48124-2100

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

Name of Employer Occupation Deacon

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt 07 / 08 / 2010

Transaction ID: 21D8ABA4A72893627CC

Amount of Each Receipt this Period 50.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
James Caffrey

Mailing Address 14 Smith St

City East Rockaway State NY Zip Code 11518-1717

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

Name of Employer information requested Occupation information requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 60.00

Date of Receipt 07 / 06 / 2010

Transaction ID: 370B9DE4747986F641C

Amount of Each Receipt this Period 20.00

Earmarked for Carly for California Inc

**C.**

Full Name (Last, First, Middle Initial)  
James Caffrey

Mailing Address 14 Smith St

City East Rockaway State NY Zip Code 11518-1717

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

Name of Employer information requested Occupation information requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 60.00

Date of Receipt 07 / 06 / 2010

Transaction ID: A642FAD04AFBA7951C3

Amount of Each Receipt this Period 20.00

Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 90.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Carolyn L. Cantrell

Mailing Address 7641 Dexter Run Cir

City State Zip Code  
Cordova TN 38016-8753

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

Name of Employer self Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 35.00

Date of Receipt: 07 / 08 / 2010

Transaction ID: 94634B42D98367693AB

Amount of Each Receipt this Period: 35.00

Earmarked for Bachmann for Congress

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

Mailing Address 747 S 6th St

City State Zip Code  
Columbus OH 43206-2126

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

Name of Employer Retired Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 55.00

Date of Receipt: 07 / 08 / 2010

Transaction ID: 38E1D631E84D9461342

Amount of Each Receipt this Period: 35.00

Earmarked for Bachmann for Congress

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

Mailing Address 2841 La Brea Dr

City State Zip Code  
Saint Charles MO 63303-9009

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

Name of Employer Self-employed Occupation Admin Assistant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt: 07 / 08 / 2010

Transaction ID: CA0A7F384AD66AD1637

Amount of Each Receipt this Period: 25.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 95.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Richard Champagne  
Mailing Address 408 River Rd  
City Uxbridge State MA Zip Code 01569-2247  
FEC ID number of contributing federal political committee. **C**  
Name of Employer self employed Occupation artist  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 25.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: D23CF66F79F4F03E1FE  
Amount of Each Receipt this Period 25.00  
Earmarked for Bachmann for Congress

**B.** Full Name (Last, First, Middle Initial)  
John and Mary Ann Charlesworth  
Mailing Address 321 Montecito Blvd  
City Napa State CA Zip Code 94559-2117  
FEC ID number of contributing federal political committee. **C**  
Name of Employer retired Occupation retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00  
Date of Receipt 07 / 09 / 2010  
Transaction ID: 2D83BBCC437E623A83F  
Amount of Each Receipt this Period 50.00  
Earmarked for Bachmann for Congress

**C.** Full Name (Last, First, Middle Initial)  
Julia Chiappetta  
Mailing Address PO Box 132  
City Cos Cob State CT Zip Code 06807-0132  
FEC ID number of contributing federal political committee. **C**  
Name of Employer self Occupation author  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 55.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: 93196EA621696CE0B94  
Amount of Each Receipt this Period 35.00  
Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 110.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 32 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ronald Chu  
Mailing Address 630 Cribbs Dr  
City Coppel State TX Zip Code 75019-2760  
FEC ID number of contributing federal political committee. **C**  
Name of Employer American Airlines Occupation Operations Research  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 15.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: B06B13FC261D6E6AE99  
Amount of Each Receipt this Period 15.00  
Earmarked for Bachmann for Congress

**B.** Full Name (Last, First, Middle Initial)  
Dean Clerico  
Mailing Address 22 Hilltop Dr  
City Shavertown State PA Zip Code 18708-9659  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Physician  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 07 / 27 / 2010  
Transaction ID: D77434CAE42B8A2E0C6  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Iris Clough  
Mailing Address 90 Stanley Ave  
City Douglas State GA Zip Code 31533-7328  
FEC ID number of contributing federal political committee. **C**  
Name of Employer n/a Occupation retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: F3C8F8D0A88B85E441D  
Amount of Each Receipt this Period 100.00  
Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 365.00  
**TOTAL** This Period (last page this line number only) ..... ►



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

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

FOR LINE NUMBER: PAGE 33 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 5052 Foothills Dr  
Unit B

City Lake Oswego State OR Zip Code 97034-3225

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

Name of Employer Retired Occupation RN

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 70.00

Date of Receipt 07 / 15 / 2010  
**Transaction ID:** A3F160511BB5B856EAA  
 Amount of Each Receipt this Period 35.00

Earmarked for Bachmann for Congress

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

Mailing Address 85 Floral Blvd

City Floral Park State NY Zip Code 11001-2645

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

Name of Employer Mineola School District Occupation School bus driver

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 105.00

Date of Receipt 07 / 08 / 2010  
**Transaction ID:** 9EA3604FAB2629B2DF6  
 Amount of Each Receipt this Period 35.00

Earmarked for Bachmann for Congress

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

Mailing Address 715 NW 114th Ave

City Portland State OR Zip Code 97229-6137

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

Name of Employer retired Occupation retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt 07 / 08 / 2010  
**Transaction ID:** 4A0FE06F4A1B9A6E20C  
 Amount of Each Receipt this Period 25.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 95.00

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

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

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

FOR LINE NUMBER: PAGE 34 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Victoria Coots

Mailing Address 1555 3rd Ave

City State Zip Code  
Oroville CA 95965-4751

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

Name of Employer Occupation  
Retired Deputy Sheriff

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 25.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2010

Transaction ID: FE4954F3AEF6EDE500B

Amount of Each Receipt this Period  
25.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)

Jean E. Costello

Mailing Address 345 Lakeview St

City State Zip Code  
Mahopac NY 10541-3334

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

Name of Employer Occupation  
retired retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 25.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2010

Transaction ID: F42E4743F6FDFD001FB

Amount of Each Receipt this Period  
25.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)

Clifton Courtney

Mailing Address 1608 Draper St

City State Zip Code  
Indianapolis IN 46203-2812

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 4.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2010

Transaction ID: 2903EF2E2563E90EBBF

Amount of Each Receipt this Period  
1.50

Earmarked for Carly for California Inc

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

51.50

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Clifton Courtney

Mailing Address 1608 Draper St

City Indianapolis State IN Zip Code 46203-2812

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** 2A05188653318D294FC

Amount of Each Receipt this Period 1.50

Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)  
Elizabeth Elizabeth Craine

Mailing Address 28977 Old Trilby Rd

City Brooksville State FL Zip Code 34602-7447

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

Name of Employer Retired Occupation RN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 55.00

Date of Receipt 07 / 08 / 2010

**Transaction ID:** 0021D68F58B6071D528

Amount of Each Receipt this Period 20.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Wesley Crawl

Mailing Address 1123 Bellview St NE

City Canton State OH Zip Code 44721-2412

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

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 35.00

Date of Receipt 07 / 08 / 2010

**Transaction ID:** 2A7DDE6D8FC380FA626

Amount of Each Receipt this Period 35.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 56.50

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Phillip Cuccia

Mailing Address 43 S East St

City Carlisle State PA Zip Code 17013-2512

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

Name of Employer US Army Occupation Soldier

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 07 / 23 / 2010

**Transaction ID:** BB8D42A4F8619007B43

Amount of Each Receipt this Period 100.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)  
Phillip Cuccia

Mailing Address 43 S East St

City Carlisle State PA Zip Code 17013-2512

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

Name of Employer US Army Occupation Soldier

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 07 / 23 / 2010

**Transaction ID:** B495038AFED368E1C20

Amount of Each Receipt this Period 100.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**C.**

Full Name (Last, First, Middle Initial)  
Elaine W. Cullen

Mailing Address 5082 Whetstone Road

City Columbia State MD Zip Code 21044-1542

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

Name of Employer Retired Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 35.00

Date of Receipt 07 / 01 / 2010

**Transaction ID:** 5146419B4CD408B878C

Amount of Each Receipt this Period 35.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 35.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
James Cumbie

Mailing Address 9749 Wisterwood Dr

City State Zip Code  
Dallas TX 75238-2669

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** BE2672F09BD2A2EA508

Amount of Each Receipt this Period 5.00

Earmarked for Carly for California Inc

**B.**

Full Name (Last, First, Middle Initial)  
James Cumbie

Mailing Address 9749 Wisterwood Dr

City State Zip Code  
Dallas TX 75238-2669

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** 9F0141B397C0C985248

Amount of Each Receipt this Period 5.00

Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Stephen Czebiniak

Mailing Address 19 Port St

City State Zip Code  
Port Crane NY 13833-1506

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

Name of Employer Termo Cidtie Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** F8D7341BB8FE0A6A40C

Amount of Each Receipt this Period 100.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10.00

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

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

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

FOR LINE NUMBER: PAGE 38 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Stephen Czebiniak  
Mailing Address 19 Port St  
City Port Crane State NY Zip Code 13833-1506  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Termo Cidtie Occupation Engineer  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 07 / 13 / 2010  
Transaction ID: 4984630563593E86638  
Amount of Each Receipt this Period 250.00  
**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.** Full Name (Last, First, Middle Initial)  
Dennis E. Czurylo  
Mailing Address 13027 S 71st Ave  
City Palos Heights State IL Zip Code 60463-2117  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Dennis E Czurylo & Associates Occupation Accountant  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 45.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: 086B29C19B459BF1A44  
Amount of Each Receipt this Period 20.00  
Earmarked for Bachmann for Congress

**C.** Full Name (Last, First, Middle Initial)  
Susie Dake  
Mailing Address 2116 Cadwell Ave  
City Oklahoma City State OK Zip Code 73170-3402  
FEC ID number of contributing federal political committee. **C**  
Name of Employer none Occupation homemaker  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 25.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: 178D1A3B5D86417B3B8  
Amount of Each Receipt this Period 25.00  
Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 45.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 39 / 344  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 13632 Ashridge Dr  
13632 Ashridge Drive

City Dallas State TX Zip Code 75240-3604

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

Name of Employer Stutzman Bromberg Occupation Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 35.00

Date of Receipt 07 / 08 / 2010

**Transaction ID:** 63A0E35BA3718125D0F

Amount of Each Receipt this Period 35.00

Earmarked for Bachmann for Congress

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

Mailing Address 142 Fuller Ave

City Corning State NY Zip Code 14830-1317

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 06 / 2010

**Transaction ID:** 26190DB3C0865FEA869

Amount of Each Receipt this Period 500.00

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

Mailing Address 142 Fuller Ave

City Corning State NY Zip Code 14830-1317

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 06 / 2010

**Transaction ID:** E3087EE3C3D12160D1A

Amount of Each Receipt this Period 500.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 535.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 142 Fuller Ave

City State Zip Code  
Corning NY 14830-1317

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 06 / 2010

Transaction ID: F455FD9016E43AFC3AF

Amount of Each Receipt this Period 500.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

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

Mailing Address 1720 Wilhurst St

City State Zip Code  
Jackson MS 39211-5750

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

Name of Employer self Occupation minister

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15.00

Date of Receipt 07 / 09 / 2010

Transaction ID: 4D0FFA1977CAEB5B770

Amount of Each Receipt this Period 15.00

Earmarked for Bachmann for Congress

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

Mailing Address 5402 Connecticut Ave NW Apt 307

City State Zip Code  
Washington DC 20015-2840

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

Name of Employer Archdiocese of Washington Occupation Administrative Assistant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 180.00

Date of Receipt 07 / 06 / 2010

Transaction ID: 71313657D786CD61F60

Amount of Each Receipt this Period 60.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial) Stephen Demauri		Date of Receipt MM / DD / YYYY 07 / 06 / 2010
Mailing Address 5402 Connecticut Ave NW Apt 307		<b>Transaction ID:</b> 36B9C08755DDE022558
City Washington	State Zip Code DC 20015-2840	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Archdiocese of Washington	Occupation Administrative Assistant	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 180.00	

**B.**

Full Name (Last, First, Middle Initial) Patricia Dibella		Date of Receipt MM / DD / YYYY 07 / 04 / 2010
Mailing Address 1499 Southpointe Ct		<b>Transaction ID:</b> F8BE56C34FF3B5ED6F5
City Melbourne	State Zip Code FL 32940-2410	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 9.11
Name of Employer Self	Occupation Homemaker/Patriot	Earmarked for Bachmann for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 18.22	

**C.**

Full Name (Last, First, Middle Initial) John E. Dollinger		Date of Receipt MM / DD / YYYY 07 / 21 / 2010
Mailing Address 5650 Longwood St		<b>Transaction ID:</b> 897F3619FA2898324D7
City Beaumont	State Zip Code TX 77707-1822	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Wathen DeShong & Junker LLP	Occupation CPA retired	Earmarked for Sue Myrick for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	59.11
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

John E. Dollinger

Mailing Address 5650 Longwood St

City State Zip Code  
Beaumont TX 77707-1822

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

Name of Employer Occupation  
Wathen DeShong & Junker CPA retired  
LLP

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
150.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 21 / 2010

Transaction ID: 63F6891A341D96F262A

Amount of Each Receipt this Period  
50.00

Earmarked for Jane Norton  
for Colorado Inc

**B.**

Full Name (Last, First, Middle Initial)

John E. Dollinger

Mailing Address 5650 Longwood St

City State Zip Code  
Beaumont TX 77707-1822

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

Name of Employer Occupation  
Wathen DeShong & Junker CPA retired  
LLP

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
150.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 21 / 2010

Transaction ID: 5CAD8D994E92BDF31B5

Amount of Each Receipt this Period  
50.00

Earmarked for Friends of  
Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)

Clyde & Patricia Dorn

Mailing Address 7201 Tiki Dr

City State Zip Code  
Cincinnati OH 45243-2040

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
20.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2010

Transaction ID: DFE870F4C72DE8F53B1

Amount of Each Receipt this Period  
20.00

Earmarked for Bachmann for  
Congress

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

120.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Robert Dreilling

Mailing Address 14 W 132nd St

City State Zip Code  
Kansas City MO 64145-1267

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

Name of Employer Occupation information requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 150.00

Date of Receipt

MM / DD / YYYY  
07 / 13 / 2010

Transaction ID: D50F96EE792D7DF84C5

Amount of Each Receipt this Period  
50.00

Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)

Robert Dreilling

Mailing Address 14 W 132nd St

City State Zip Code  
Kansas City MO 64145-1267

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

Name of Employer Occupation information requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 150.00

Date of Receipt

MM / DD / YYYY  
07 / 13 / 2010

Transaction ID: 2A3EC5C12853391EA17

Amount of Each Receipt this Period  
50.00

Earmarked for Carly for California Inc

**C.**

Full Name (Last, First, Middle Initial)

Brian Dubicki

Mailing Address 4814 Station House Ln

City State Zip Code  
Virginia Beach VA 23455-1935

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

Name of Employer Occupation  
Merrimac Center Security Controller

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 40.00

Date of Receipt

MM / DD / YYYY  
07 / 09 / 2010

Transaction ID: 592DD541026A9D7014C

Amount of Each Receipt this Period  
15.00

Earmarked for Bachmann for Congress

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

115.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ronald DuBois  
Mailing Address 235 Larch Ave  
City Bogota State NJ Zip Code 07603-1223  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 30.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: A14FBE00FF4EC70DA98  
Amount of Each Receipt this Period 20.00  
Earmarked for Bachmann for Congress

**B.** Full Name (Last, First, Middle Initial)  
Sande Duncan  
Mailing Address 407 S 5th St  
City Cottage Grove State OR Zip Code 97424-2407  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 35.00  
Date of Receipt 07 / 14 / 2010  
Transaction ID: 881FC5933452859BB39  
Amount of Each Receipt this Period 35.00  
Earmarked for Bachmann for Congress

**C.** Full Name (Last, First, Middle Initial)  
Margene Eiguren  
Mailing Address 3635 Arock Rd  
City Jordan Valley State OR Zip Code 97910-9781  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Self-Employed  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 60.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: 8ED74DC50C5D1E16B45  
Amount of Each Receipt this Period 35.00  
Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 90.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 344
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)  
**SUSAN B ANTHONY LIST INC. CANDIDATE FUND**

<b>A.</b>	Full Name (Last, First, Middle Initial) Joanne Emmons		Date of Receipt MM / DD / YYYY 07 / 13 / 2010
	Mailing Address 13904 Northland Dr		<b>Transaction ID:</b> D82357DD1EA0AE24B91
	City Big Rapids	State MI	Zip Code 49307-8916
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer St. of Michigan	Occupation St Senator	<b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Joanne Emmons		Date of Receipt MM / DD / YYYY 07 / 13 / 2010
	Mailing Address 13904 Northland Dr		<b>Transaction ID:</b> 986403C51EA0715E4B2
	City Big Rapids	State MI	Zip Code 49307-8916
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer St. of Michigan	Occupation St Senator	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Ray Eneim		Date of Receipt MM / DD / YYYY 07 / 13 / 2010
	Mailing Address 745 Walnut St		<b>Transaction ID:</b> D323EEE83F10C918CBD
	City West Sacramento	State CA	Zip Code 95691-2439
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer Information Requested	Occupation Information Requested	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 46 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Ray Eneim

Mailing Address 745 Walnut St

City State Zip Code  
West Sacramento CA 95691-2439

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
50.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2010

Transaction ID: 748160E34CE94110682

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)  
Joanne English

Mailing Address 2416 Gramercy Ave

City State Zip Code  
Torrance CA 90501-4444

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

Name of Employer Occupation  
Aerospace Corp. Programmer Analyst

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
40.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2010

Transaction ID: FC3C85EB56093CE20E1

Amount of Each Receipt this Period  
20.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Frank L. Espinosa

Mailing Address 10725 Cypress Ave

City State Zip Code  
Kansas City MO 64137-1843

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

Name of Employer Occupation  
Retired Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
100.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2010

Transaction ID: 704764B6DD896A5B38B

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

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

20.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Frank L. Espinosa

Mailing Address 10725 Cypress Ave

City State Zip Code  
Kansas City MO 64137-1843

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

Name of Employer Retired Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2010

Transaction ID: C269A148522BAA550A1

Amount of Each Receipt this Period

50.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)  
Hilda Estefano

Mailing Address 251 SW 47th Ave

City State Zip Code  
Coral Gables FL 33134-1465

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 50.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2010

Transaction ID: E7F1DCD00B986621F38

Amount of Each Receipt this Period

15.00

Earmarked for Carly for California Inc

**C.**

Full Name (Last, First, Middle Initial)  
Hilda Estefano

Mailing Address 251 SW 47th Ave

City State Zip Code  
Coral Gables FL 33134-1465

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 50.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2010

Transaction ID: EB2FC33C9ED56167A5F

Amount of Each Receipt this Period

15.00

Earmarked for Friends of Sharron Angle

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

30.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Marilyn Evans

Mailing Address 263 S Beach Rd

City Hobe Sound State FL Zip Code 33455-2603

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

Name of Employer Evans Financial Services, Limited Occupation Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 06 / 2010

**Transaction ID:** 8771EAB1FFC205DE5AC

Amount of Each Receipt this Period 100.00

**B.**

Full Name (Last, First, Middle Initial)  
Marilyn Evans

Mailing Address 263 S Beach Rd

City Hobe Sound State FL Zip Code 33455-2603

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

Name of Employer Evans Financial Services, Limited Occupation Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 06 / 2010

**Transaction ID:** D26694501C305E1D653

Amount of Each Receipt this Period 250.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Marilyn Evans

Mailing Address 263 S Beach Rd

City Hobe Sound State FL Zip Code 33455-2603

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

Name of Employer Evans Financial Services, Limited Occupation Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 06 / 2010

**Transaction ID:** CF86411D136734DCF8B

Amount of Each Receipt this Period 100.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ► 100.00

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



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

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

FOR LINE NUMBER: PAGE 49 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Karen Falkowski  
Mailing Address 16 Perry Ave  
City Monroe Twp State NJ Zip Code 08831-2436  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Trebor Corporation Occupation Logistics  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 50.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: 18DFBA5CDC7290C3BDF  
Amount of Each Receipt this Period 50.00  
Earmarked for Bachmann for Congress

**B.** Full Name (Last, First, Middle Initial)  
Lisa N. Ferguson  
Mailing Address 137 Darroch Rd  
City Delmar State NY Zip Code 12054-3825  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Nigro Companies Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 50.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: ACAC69145CF3F31DCFE  
Amount of Each Receipt this Period 50.00  
Earmarked for Bachmann for Congress

**C.** Full Name (Last, First, Middle Initial)  
Thomas G. Ferrara  
Mailing Address 5973 State Highway 361  
City Port Aransas State TX Zip Code 78373-4847  
FEC ID number of contributing federal political committee. **C**  
Name of Employer USAF Occupation Col.  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 35.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: D05CE7CE533D670F3EB  
Amount of Each Receipt this Period 35.00  
Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 135.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 50 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 1807 W Harle Ave

City Anaheim State CA Zip Code 92804-6114

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** 59AE72BA438D1E8B5B0

Amount of Each Receipt this Period 100.00

Earmarked for Carly for California Inc

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

Mailing Address 1807 W Harle Ave

City Anaheim State CA Zip Code 92804-6114

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** 4B13488F2B178EEFC6E

Amount of Each Receipt this Period 50.00

Earmarked for Friends of Sharron Angle

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

Mailing Address 1807 W Harle Ave

City Anaheim State CA Zip Code 92804-6114

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** 5A787061481F595E271

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 250.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Charity A. Fournier

Mailing Address 7345 Willard Rd

City Montrose State MI Zip Code 48457-9721

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

Name of Employer info. requested Occupation info. requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 20.00

Date of Receipt: 07 / 26 / 2010

Transaction ID: 663377ADCA1841B2AF0

Amount of Each Receipt this Period: 10.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**B.**

Full Name (Last, First, Middle Initial)  
Charity A. Fournier

Mailing Address 7345 Willard Rd

City Montrose State MI Zip Code 48457-9721

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

Name of Employer info. requested Occupation info. requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 20.00

Date of Receipt: 07 / 26 / 2010

Transaction ID: AEC5A5686FFBB419A14

Amount of Each Receipt this Period: 10.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Roland Fredette

Mailing Address 820 Mabry Rd NE

City Atlanta State GA Zip Code 30328-2662

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

Name of Employer info. requested Occupation info. requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 110.00

Date of Receipt: 07 / 26 / 2010

Transaction ID: 5B192998D4A006CE237

Amount of Each Receipt this Period: 10.00

**[MEMO ITEM]**  
Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 144 S Wayehutta Rd

City Cullowhee State NC Zip Code 28723-9720

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

Name of Employer jacks rec center Occupation trainer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 09 / 2010

**Transaction ID:** 136CD8B8D1A69D8F142

Amount of Each Receipt this Period 20.00

Earmarked for Bachmann for Congress

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

Mailing Address PO Box 7056

City Visalia State CA Zip Code 93290-7056

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

Name of Employer info requested Occupation info requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 26 / 2010

**Transaction ID:** 17A9C2995E75BFDC153

Amount of Each Receipt this Period 100.00

Earmarked for Carly for California Inc

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

Mailing Address PO Box 7056

City Visalia State CA Zip Code 93290-7056

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

Name of Employer info requested Occupation info requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 26 / 2010

**Transaction ID:** C35A36EABAF40504C45

Amount of Each Receipt this Period 100.00

Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 220.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address PO Box 7056

City Visalia State CA Zip Code 93290-7056

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 26 / 2010

**Transaction ID:** CC85B5AECEDCCF320E8

Amount of Each Receipt this Period 100.00

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

Mailing Address 4515 Willard Ave Apt S2318

City Chevy Chase State MD Zip Code 20815-3631

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

Name of Employer Trident Systems Inc Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** E111D705F08A623407F

Amount of Each Receipt this Period 200.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

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

Mailing Address 4515 Willard Ave Apt S2318

City Chevy Chase State MD Zip Code 20815-3631

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

Name of Employer Trident Systems Inc Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** 48B41ADE3A221E75414

Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 300.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Jean-Claude Gagnebin  
Mailing Address 23 Berkshire Dr  
City Danbury State CT Zip Code 06811-4713  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 15.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: D5F5AC8230BBA895CAE  
Amount of Each Receipt this Period 15.00  
Earmarked for Bachmann for Congress

**B.** Full Name (Last, First, Middle Initial)  
Donald P. Galamaga  
Mailing Address 30 White Rock Rd  
City Warwick State RI Zip Code 02889-6314  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Consultant  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 35.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: C6F07F73ADC02344583  
Amount of Each Receipt this Period 35.00  
Earmarked for Bachmann for Congress

**C.** Full Name (Last, First, Middle Initial)  
Paul Gamman  
Mailing Address 1625 Pine View Dr NW  
City Issaquah State WA Zip Code 98027-8670  
FEC ID number of contributing federal political committee. **C**  
Name of Employer self Occupation chiro  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 35.00  
Date of Receipt 07 / 09 / 2010  
Transaction ID: EBBCAFA34839ED5AC07  
Amount of Each Receipt this Period 35.00  
Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 85.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Carole Gangloff Mailing Address 3104 Bangor Ct City State Zip Code Las Vegas NV 89134-8961 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Registered Nurse Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M / D D / Y Y Y Y 07 / 06 / 2010 <b>Transaction ID:</b> C2039B732E45EA61C00 Amount of Each Receipt this Period 500.00 <b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
<b>B.</b>	Full Name (Last, First, Middle Initial) Edward Gansberg Mailing Address 1211 Shady Oak Dr City State Zip Code Carson City NV 89701-5737 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Dinter Engineering Co. Occupation Electrical engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 55.00	Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2010 <b>Transaction ID:</b> E93213698D2EB318141 Amount of Each Receipt this Period 10.00 Earmarked for Bachmann for Congress
<b>C.</b>	Full Name (Last, First, Middle Initial) Edward Gansberg Mailing Address 1211 Shady Oak Dr City State Zip Code Carson City NV 89701-5737 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Dinter Engineering Co. Occupation Electrical engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 55.00	Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2010 <b>Transaction ID:</b> 9F0B9CB665BB194275B Amount of Each Receipt this Period 10.00 Earmarked for Carly for California Inc

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	20.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Edward Gansberg

Mailing Address 1211 Shady Oak Dr

City Carson City State NV Zip Code 89701-5737

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

Name of Employer Dinter Engineering Co. Occupation Electrical engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 55.00

Date of Receipt 07 / 09 / 2010

**Transaction ID:** A0D092134CCAED26372

Amount of Each Receipt this Period 35.00

Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)  
Thomas L Gennings

Mailing Address 280 Snooks Rd

City Sundance State WY Zip Code 82729-9216

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

Name of Employer Self Occupation Oil Well Drilling Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 09 / 2010

**Transaction ID:** DBB9D4203973AD7BF85

Amount of Each Receipt this Period 100.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Ruth Gensman

Mailing Address 14176 SW 111th Ct

City Dunnellon State FL Zip Code 34432-5624

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

Name of Employer none Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 75.00

Date of Receipt 07 / 12 / 2010

**Transaction ID:** 6F9E7529DC8F24869F7

Amount of Each Receipt this Period 25.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ► 135.00

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



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

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

FOR LINE NUMBER: PAGE 57 / 344  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ruth Gensman  
Mailing Address 14176 SW 111th Ct  
City State Zip Code  
Dunnellon FL 34432-5624  
FEC ID number of contributing federal political committee. **C**  
Name of Employer none Occupation retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 75.00  
Date of Receipt 07 / 12 / 2010  
Transaction ID: E7AF7797490BB50E251  
Amount of Each Receipt this Period 25.00  
**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.** Full Name (Last, First, Middle Initial)  
Teresa Gery  
Mailing Address 1307 Belasco Ave  
City State Zip Code  
Pittsburgh PA 15216-3347  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 50.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: E8C201B37C74318B256  
Amount of Each Receipt this Period 50.00  
Earmarked for Friends of Sharron Angle

**C.** Full Name (Last, First, Middle Initial)  
Albert Ghirardelli  
Mailing Address 15937 Londelius St  
City State Zip Code  
North Hills CA 91343-4841  
FEC ID number of contributing federal political committee. **C**  
Name of Employer info requested Occupation info requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00  
Date of Receipt 07 / 06 / 2010  
Transaction ID: C5793B61EAB803D34DE  
Amount of Each Receipt this Period 50.00  
**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ► 50.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Albert Ghirardelli

Mailing Address 15937 Londelius St

City North Hills State CA Zip Code 91343-4841

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 06 / 2010

Transaction ID: E7BFB041CC628AA4873

Amount of Each Receipt this Period 50.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)  
Dick Giuffre

Mailing Address 711 Player Ct

City Conroe State TX Zip Code 77302-3827

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

Name of Employer Soules Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 35.00

Date of Receipt 07 / 08 / 2010

Transaction ID: 7A65ED35294E7D34D87

Amount of Each Receipt this Period 35.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Herman Gleicher

Mailing Address 3189 Felda St

City Port Charlotte State FL Zip Code 33948-6057

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

Name of Employer Self Occupation None

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 08 / 2010

Transaction ID: 5018E92D5EA3533D516

Amount of Each Receipt this Period 50.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 85.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 45 Harrigan Ave

City State Zip Code  
Monroe Township NJ 08831-8320

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

Name of Employer State of New Jersey Occupation Law Enforcement

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 08 / 2010

**Transaction ID:** 909FDD879407F4D30F5

Amount of Each Receipt this Period  
25.00

Earmarked for Bachmann for Congress

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

Mailing Address 657 Walnut St

City State Zip Code  
Edmonds WA 98020-3421

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

Name of Employer Glenn T Goodwin, PhD Occupation bookkeeper

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 08 / 2010

**Transaction ID:** 4114D4F779970AADADD

Amount of Each Receipt this Period  
10.00

Earmarked for Bachmann for Congress

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

Mailing Address 8048 Ians Aly

City State Zip Code  
Laurel MD 20724-6133

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

Name of Employer Nemetschek North America Occupation Software Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 35.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 08 / 2010

**Transaction ID:** 5F7598C258490F7B3F1

Amount of Each Receipt this Period  
35.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► **70.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
John D. Graham

Mailing Address 16 Sugar Knoll Dr

City State Zip Code  
Devon PA 19333-1558

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 06 / 2010

Transaction ID: BDCFC6ACBC217BC1A4D

Amount of Each Receipt this Period

100.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**B.**

Full Name (Last, First, Middle Initial)  
John D. Graham

Mailing Address 16 Sugar Knoll Dr

City State Zip Code  
Devon PA 19333-1558

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 06 / 2010

Transaction ID: 6527398A35B0B173FE9

Amount of Each Receipt this Period

100.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Danita K. Grant

Mailing Address 3411 Camelot Dr

City State Zip Code  
Marietta GA 30062-4408

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

Name of Employer Occupation  
Retired System Analyst

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 60.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2010

Transaction ID: F4192DB6E1287A79867

Amount of Each Receipt this Period

35.00

Earmarked for Bachmann for Congress

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

35.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 344
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Ronald Grant		Date of Receipt
	Mailing Address 9230 Wister Dr		<input type="text" value="07"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	La Mesa	CA	91941-4138
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: C0690F66137CEC3D1B4
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="100.00"/>	
		Amount of Each Receipt this Period <input type="text" value="50.00"/>	
		Earmarked for Carly for California Inc	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ronald Grant		Date of Receipt
	Mailing Address 9230 Wister Dr		<input type="text" value="07"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	La Mesa	CA	91941-4138
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: 1D9624B57D3EE740E22
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="100.00"/>	
		Amount of Each Receipt this Period <input type="text" value="50.00"/>	
		Earmarked for Friends of Sharron Angle	

<b>C.</b>	Full Name (Last, First, Middle Initial) Therese Grimm		Date of Receipt
	Mailing Address 10882 Creek Rd		<input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Ojai	CA	93023-9423
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer info requested		Occupation info requested	Transaction ID: AD072320EBE0FFEA8E3
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="120.00"/>	
		Amount of Each Receipt this Period <input type="text" value="120.00"/>	
		Earmarked for Carly for California Inc	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="220.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 62 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Richard Grubb  
 Mailing Address 26005 Wilkerson Rd  
 City Conifer State CO Zip Code 80433-9130  
 Date of Receipt 07 / 08 / 2010  
**Transaction ID:** D6C3D8F006BC44D5B72  
 Amount of Each Receipt this Period 35.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Catamount Constructors Occupation IT Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 65.00  
 Earmarked for Bachmann for Congress

**B.** Full Name (Last, First, Middle Initial)  
Robert L. Gwinn, Sr  
 Mailing Address PO Box 720  
 City Ridge Spring State SC Zip Code 29129-0720  
 Date of Receipt 07 / 11 / 2010  
**Transaction ID:** BFEDAF4D3F18FB8BD2C  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Parrish & Gwinn Insurance Group Occupation Insurance Broker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 1350.00

**C.** Full Name (Last, First, Middle Initial)  
Michael Hahn  
 Mailing Address 87 Market St Apt 1  
 City Clifton State NJ Zip Code 07012-2421  
 Date of Receipt 07 / 08 / 2010  
**Transaction ID:** 21C27812EE4CC126EEB  
 Amount of Each Receipt this Period 5.50  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RETIRED-DIS. Occupation RETIRED DIS.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 8.00  
 Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1040.50  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 344  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Tania M. Hake

Mailing Address 11429 Pine Top Ln NE

City State Zip Code  
Albuquerque NM 87111-6584

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

Name of Employer Occupation  
Stay at home mom

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15.00

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2010

**Transaction ID:** 6CB7B94C6C5A3E4ACBD

Amount of Each Receipt this Period  
15.00

Earmarked for Bachmann for Congress

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

Mailing Address 3816 Abbott Rd

City State Zip Code  
Sevierville TN 37862-8246

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

Name of Employer Occupation  
Retired Grandfather

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2010

**Transaction ID:** 51A6BB7AA1B0FA88069

Amount of Each Receipt this Period  
25.00

Earmarked for Bachmann for Congress

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

Mailing Address 301 S 7th St

City State Zip Code  
Le Sueur MN 56058-2220

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 20.00

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2010

**Transaction ID:** 0F3116D2737C7BE187F

Amount of Each Receipt this Period  
20.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► **60.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Brian T. Hansen

Mailing Address 35 Silver Leaf Dr

City State Zip Code  
Kalispell MT 59901-7962

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

Name of Employer Occupation  
Wal Mart Retail Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 20.00

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2010

**Transaction ID:** A658D283EA94732CBA5

Amount of Each Receipt this Period  
20.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
H. C. Hansmann, Jr.

Mailing Address 7834 W Calavar Rd

City State Zip Code  
Peoria AZ 85381-4669

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

Name of Employer Occupation  
retired retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 20.00

Date of Receipt  
MM / DD / YYYY  
07 / 09 / 2010

**Transaction ID:** 5E7387E70E2E4036D25

Amount of Each Receipt this Period  
10.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Debra Hanson

Mailing Address 14 Townsend Pl

City State Zip Code  
Gardiner ME 04345-1930

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

Name of Employer Occupation  
information requested information requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
MM / DD / YYYY  
07 / 26 / 2010

**Transaction ID:** 8604A9AAD43EF2FECF

Amount of Each Receipt this Period  
50.00

Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ► **80.00**

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



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

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

FOR LINE NUMBER: PAGE 65 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Debra Hanson  
Mailing Address 14 Townsend Pl  
City Gardiner State ME Zip Code 04345-1930  
FEC ID number of contributing federal political committee. **C**  
Name of Employer information requested Occupation information requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: D20E1F7B9FD97382FFE  
Amount of Each Receipt this Period 50.00  
Earmarked for Friends of Sharron Angle

**B.** Full Name (Last, First, Middle Initial)  
Frances Oc Hardart  
Mailing Address 20 Argyle Pl  
City Bronxville State NY Zip Code 10708-4215  
FEC ID number of contributing federal political committee. **C**  
Name of Employer none Occupation at home  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: F930D506AC544E09581  
Amount of Each Receipt this Period 100.00  
Earmarked for Bachmann for Congress

**C.** Full Name (Last, First, Middle Initial)  
Grace Harman  
Mailing Address 266 E Main St Apt 702  
City Columbus State OH Zip Code 43215-5229  
FEC ID number of contributing federal political committee. **C**  
Name of Employer retired Occupation retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 15.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: E1FDC086ECA87D33BE6  
Amount of Each Receipt this Period 15.00  
Earmarked for Schmidt for Congress Committee

**SUBTOTAL** of Receipts This Page (optional) ..... ► 165.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Phil Harris

Mailing Address 4902 W 2nd St

City State Zip Code  
Greeley CO 80634-4384

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10.00

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2010

**Transaction ID:** A4DF720BF33FEAD74B8

Amount of Each Receipt this Period  
10.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Barton Hartzell

Mailing Address 836 2nd Avenue Apt. 302

City State Zip Code  
Kirkland WA 98033-3927

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10.00

Date of Receipt  
MM / DD / YYYY  
07 / 03 / 2010

**Transaction ID:** D39B15BBB2BAD87E80A

Amount of Each Receipt this Period  
10.00

Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Robert and Wanda Hayes

Mailing Address 4117 Tulane Dr

City State Zip Code  
Amarillo TX 79109-5534

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt  
MM / DD / YYYY  
07 / 09 / 2010

**Transaction ID:** 8216A78F80D4F54D3E6

Amount of Each Receipt this Period  
50.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► **70.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Charles Hecht

Mailing Address 1801 Avenue N

City State Zip Code  
Brooklyn NY 11230-6102

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

Name of Employer Occupation  
Hunter College CUNY Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2010

**Transaction ID:** 208916840CC79EE1FEF

Amount of Each Receipt this Period  
200.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)  
Charles Hecht

Mailing Address 1801 Avenue N

City State Zip Code  
Brooklyn NY 11230-6102

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

Name of Employer Occupation  
Hunter College CUNY Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2010

**Transaction ID:** 77D47EC8284BE2A98E8

Amount of Each Receipt this Period  
200.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**C.**

Full Name (Last, First, Middle Initial)  
Sherri Henson

Mailing Address 605 Shepherds Rest Ln

City State Zip Code  
Odenville AL 35120-6129

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15.00

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2010

**Transaction ID:** 324601B7AB6AC3CA857

Amount of Each Receipt this Period  
15.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 344
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Donna Hetland	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 122 April Breeze St	<b>Transaction ID:</b> 0E088138CEA52A6626F
	City State Zip Code Montgomery TX 77356-5882	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc
	Name of Employer Occupation homemaker homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Donna Hetland	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 122 April Breeze St	<b>Transaction ID:</b> 4C67E622ACAC28807D6
	City State Zip Code Montgomery TX 77356-5882	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
	Name of Employer Occupation homemaker homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ronald Hicks	Date of Receipt MM / DD / YYYY 07 / 08 / 2010
	Mailing Address 19354 49th PI NE	<b>Transaction ID:</b> 276BEB0CFD4846C7762
	City State Zip Code Lake Forest Park WA 98155-2935	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Earmarked for Bachmann for Congress
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	20.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 69 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 27862 Isela Ct

City Laguna Niguel State CA Zip Code 92677-3725

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

Name of Employer LutiMax Nutraceuticals, LLC Occupation Executive Admin

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 70.00

Date of Receipt 07 / 08 / 2010

**Transaction ID:** 618380452259F5F7881

Amount of Each Receipt this Period 35.00

Earmarked for Bachmann for Congress

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

Mailing Address 12901 Lafayette St Unit H

City Thornton State CO Zip Code 80241-3950

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

Name of Employer Adams 12 Five Star Schools Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10.00

Date of Receipt 07 / 08 / 2010

**Transaction ID:** 648D5A597F47313190B

Amount of Each Receipt this Period 10.00

Earmarked for Bachmann for Congress

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

Mailing Address 2618 Corlot St

City Kalamazoo State MI Zip Code 49004-1727

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

Name of Employer Kalamazoo Area Math and Science Center Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 35.00

Date of Receipt 07 / 08 / 2010

**Transaction ID:** 15AEC748D3C41A1F703

Amount of Each Receipt this Period 35.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 80.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial) Susan Hunt		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
Mailing Address 1149 Monogram Way		<b>Transaction ID:</b> 187E7FF4D73A3083B24
City Las Vegas	State Zip Code NV 89123-3606	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Harland Education Systems	Occupation Data Entry	Earmarked for Bachmann for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5.00	

**B.**

Full Name (Last, First, Middle Initial) John L. Hurley, Sr.		Date of Receipt MM / DD / YYYY 07 / 19 / 2010
Mailing Address 2195 Ibis Isle Rd Apt 8		<b>Transaction ID:</b> DDF3A42722F0BCA3C61
City Palm Beach	State Zip Code FL 33480-5365	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Commercial Pipe and Supply Comp.	Occupation Businessman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

**C.**

Full Name (Last, First, Middle Initial) John L. Hurley, Sr.		Date of Receipt MM / DD / YYYY 07 / 19 / 2010
Mailing Address 2195 Ibis Isle Rd Apt 8		<b>Transaction ID:</b> CDD727D474BB643DC7C
City Palm Beach	State Zip Code FL 33480-5365	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Commercial Pipe and Supply Comp.	Occupation Businessman	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	255.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) John L. Hurley, Sr.	Date of Receipt MM / DD / YYYY 07 / 19 / 2010
	Mailing Address 2195 Ibis Isle Rd Apt 8	<b>Transaction ID:</b> F9A96E6D4A1D4F96860
	City State Zip Code Palm Beach FL 33480-5365	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Commercial Pipe and Supply Comp.	Occupation Businessman	<b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) Jane F. Jessey		
Mailing Address 6144 Joust Ln		
City State Zip Code Alexandria VA 22315-4809		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 6AEF8F549886B088575
Name of Employer Retired		Amount of Each Receipt this Period 20.00
Occupation Retired		Earmarked for Bachmann for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 20.00		
Full Name (Last, First, Middle Initial) Mary Alice Johnson		
Mailing Address 898 Sunbeam Cir		Date of Receipt MM / DD / YYYY 07 / 06 / 2010
City State Zip Code Oneida WI 54155-9150		<b>Transaction ID:</b> 28DC474C983B5F942EE
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer St. Mary's Hospital		Earmarked for Friends of Sharron Angle
Occupation Nurse Anesthetist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 100.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	70.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary Alice Johnson		Date of Receipt MM / DD / YYYY 07 / 06 / 2010
	Mailing Address 898 Sunbeam Cir		<b>Transaction ID:</b> 2416A37D0D03806FD97
	City Oneida	State WI	Zip Code 54155-9150
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer St. Mary's Hospital	Occupation Nurse Anesthetist	Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mary Jo Johnson		Date of Receipt MM / DD / YYYY 07 / 22 / 2010
	Mailing Address 110 Bentley Ct		<b>Transaction ID:</b> E7F1AECD62356D76873
	City Lebanon	State PA	Zip Code 17042-4161
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 10.00
	Name of Employer Retired	Occupation Housewife	Earmarked for Bachmann for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Genevieve Jones		Date of Receipt MM / DD / YYYY 07 / 01 / 2010
	Mailing Address 1569 E Stanford Avenue		<b>Transaction ID:</b> 8AB3487C7920AC6046A
	City Gilbert	State AZ	Zip Code 85234-3699
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 10.00
	Name of Employer retired	Occupation retired	Earmarked for Bachmann for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	70.00
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: PAGE 73 / 344  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Genevieve Jones  
Mailing Address 1569 E Stanford Avenue  
City Gilbert State AZ Zip Code 85234-3699  
FEC ID number of contributing federal political committee. **C**  
Name of Employer retired Occupation retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 30.00  
Date of Receipt 07 / 01 / 2010  
Transaction ID: 7FF704070035BAE91CF  
Amount of Each Receipt this Period 10.00  
Earmarked for Carly for California Inc

**B.** Full Name (Last, First, Middle Initial)  
Genevieve Jones  
Mailing Address 1569 E Stanford Avenue  
City Gilbert State AZ Zip Code 85234-3699  
FEC ID number of contributing federal political committee. **C**  
Name of Employer retired Occupation retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 30.00  
Date of Receipt 07 / 01 / 2010  
Transaction ID: 3F7C0EECA1B8C32667C  
Amount of Each Receipt this Period 10.00  
Earmarked for Friends of Sharron Angle

**C.** Full Name (Last, First, Middle Initial)  
Mary C. Joseph  
Mailing Address 2629 Cyclorama Dr  
City Cincinnati State OH Zip Code 45211-8314  
FEC ID number of contributing federal political committee. **C**  
Name of Employer info requested Occupation info requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 25.00  
Date of Receipt 07 / 13 / 2010  
Transaction ID: 9876698C7F20611C207  
Amount of Each Receipt this Period 25.00  
Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 45.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 74 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address PO Box 460705

City State Zip Code  
Papillion NE 68046-0705

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

Name of Employer Occupation  
Capitol City Christian Church Missionary

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
07 / 09 / 2010

**Transaction ID:** C97A6F586CFC583D05C

Amount of Each Receipt this Period  
100.00

Earmarked for Bachmann for Congress

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

Mailing Address 7 Waterbluff Dr

City State Zip Code  
Ormond Beach FL 32174-3076

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

Name of Employer Occupation  
Lassiter Transportation Group CFO

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 50.00

Date of Receipt  
MM / DD / YYYY  
07 / 12 / 2010

**Transaction ID:** 6D68362011D58D7E313

Amount of Each Receipt this Period  
50.00

Earmarked for Bachmann for Congress

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

Mailing Address 1811 Greenplace Ter

City State Zip Code  
Rockville MD 20850-2954

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

Name of Employer Occupation  
information requested information requested

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 100.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2010

**Transaction ID:** 9C40F59EEBAC9249420

Amount of Each Receipt this Period  
50.00

Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 200.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
William Keefe

Mailing Address 1811 Greenplace Ter

City State Zip Code  
Rockville MD 20850-2954

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

Name of Employer information requested Occupation information requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt: 07 / 06 / 2010

**Transaction ID:** F2D8E8F80FE17523945

Amount of Each Receipt this Period: 50.00

Earmarked for Carly for California Inc

**B.**

Full Name (Last, First, Middle Initial)  
Pauline Keinath

Mailing Address 12342 Creekhaven Dr

City State Zip Code  
Saint Louis MO 63131-3825

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

Name of Employer N/A Occupation Housewife

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 07 / 09 / 2010

**Transaction ID:** E026904B81B59A02C86

Amount of Each Receipt this Period: 1000.00

Earmarked for Carly for California Inc

**C.**

Full Name (Last, First, Middle Initial)  
Pauline Keinath

Mailing Address 12342 Creekhaven Dr

City State Zip Code  
Saint Louis MO 63131-3825

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

Name of Employer N/A Occupation Housewife

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 07 / 09 / 2010

**Transaction ID:** 0E01C517F02B9878027

Amount of Each Receipt this Period: 1000.00

Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2050.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
David Keiper

Mailing Address 882 S Coral Key Ave

City State Zip Code  
Gilbert AZ 85233-7432

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 30.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2010

Transaction ID: FD01E93417C10C88B97

Amount of Each Receipt this Period  
20.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Jim L. Keller

Mailing Address 5929 Wild Horse Run

City State Zip Code  
College Station TX 77845-2346

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

Name of Employer Occupation  
Texas A&M Foundation Director of Development

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 35.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2010

Transaction ID: A92F6206EC7A6EA2E1D

Amount of Each Receipt this Period  
35.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Patrick A. Kelly

Mailing Address 36 Arthur Ave  
Apt 4

City State Zip Code  
East Providence RI 02914-4024

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

Name of Employer Occupation  
Retired Retired Librarian - college

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2010

Transaction ID: 1F39A42924BEC31BC27

Amount of Each Receipt this Period  
200.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

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

55.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial) Patrick A. Kelly		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 36 Arthur Ave Apt 4		<b>Transaction ID:</b> 32E3AB6753E5C407D15
City East Providence	State Zip Code RI 02914-4024	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Retired	Occupation Retired Librarian - college	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

**B.**

Full Name (Last, First, Middle Initial) Patrick A. Kelly		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 36 Arthur Ave Apt 4		<b>Transaction ID:</b> 9F10900C36D3692D0E5
City East Providence	State Zip Code RI 02914-4024	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Retired	Occupation Retired Librarian - college	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

**C.**

Full Name (Last, First, Middle Initial) Don Kennedy		Date of Receipt MM / DD / YYYY 07 / 26 / 2010
Mailing Address 11403 Fairfax Dr		<b>Transaction ID:</b> 49327BA9CAC29121EEF
City Great Falls	State Zip Code VA 22066-1309	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Information Requested	Occupation Information Requested	Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Don Kennedy

Mailing Address 11403 Fairfax Dr

City State Zip Code  
Great Falls VA 22066-1309

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2010

Transaction ID: 011125A48A118EBC5FA

Amount of Each Receipt this Period

50.00

Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)  
Janet Klimczak

Mailing Address 3247 S Hametown Road

City State Zip Code  
Norton OH 44203-5011

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2010

Transaction ID: 0DA81E13CE87791F637

Amount of Each Receipt this Period

50.00

[MEMO ITEM]  
Earmarked for Carly for California Inc

**C.**

Full Name (Last, First, Middle Initial)  
Janet Klimczak

Mailing Address 3247 S Hametown Road

City State Zip Code  
Norton OH 44203-5011

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2010

Transaction ID: 7D2F1DC8DCC60633447

Amount of Each Receipt this Period

50.00

[MEMO ITEM]  
Earmarked for Friends of Sharron Angle

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

50.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 344  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Karen Kline  
Mailing Address PO Box 3258  
City Rancho Cordova State CA Zip Code 95741-3258  
FEC ID number of contributing federal political committee. **C**  
Name of Employer n/a Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.00  
Date of Receipt 07 / 06 / 2010  
Transaction ID: 61AE7C844676B594126  
Amount of Each Receipt this Period 20.00  
Earmarked for Jennifer Horn for Congress

**B.** Full Name (Last, First, Middle Initial)  
Karen Kline  
Mailing Address PO Box 3258  
City Rancho Cordova State CA Zip Code 95741-3258  
FEC ID number of contributing federal political committee. **C**  
Name of Employer n/a Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.00  
Date of Receipt 07 / 06 / 2010  
Transaction ID: D52C19A01F82304D3FA  
Amount of Each Receipt this Period 10.00  
Earmarked for Friends of Joe Pitts

**C.** Full Name (Last, First, Middle Initial)  
Karen Kline  
Mailing Address PO Box 3258  
City Rancho Cordova State CA Zip Code 95741-3258  
FEC ID number of contributing federal political committee. **C**  
Name of Employer n/a Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.00  
Date of Receipt 07 / 06 / 2010  
Transaction ID: 3DDFAAE14E36FAD943F  
Amount of Each Receipt this Period 10.00  
Earmarked for Candice Miller for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 40.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)  
Karen Kline

Mailing Address PO Box 3258

City State Zip Code  
Rancho Cordova CA 95741-3258

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

Name of Employer Occupation  
n/a Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 06 / 2010

Transaction ID: C32A5B812A49D7F8C47

Amount of Each Receipt this Period  
10.00

Earmarked for Sue Myrick  
for Congress

B.

Full Name (Last, First, Middle Initial)  
Karen Kline

Mailing Address PO Box 3258

City State Zip Code  
Rancho Cordova CA 95741-3258

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

Name of Employer Occupation  
n/a Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 06 / 2010

Transaction ID: 824E92A101715343FD0

Amount of Each Receipt this Period  
100.00

Earmarked for Carly for  
California Inc

C.

Full Name (Last, First, Middle Initial)  
Karen Kline

Mailing Address PO Box 3258

City State Zip Code  
Rancho Cordova CA 95741-3258

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

Name of Employer Occupation  
n/a Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 06 / 2010

Transaction ID: C2E432B90B6BF668BF9

Amount of Each Receipt this Period  
10.00

Earmarked for Jane Norton  
for Colorado Inc

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

120.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SUSAN B ANTHONY LIST INC. CANDIDATE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
Karen Kline

Mailing Address PO Box 3258

City Rancho Cordova State CA Zip Code 95741-3258

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 07 / 06 / 2010

**Transaction ID:** 36EB9531D0EA272AA8D

Amount of Each Receipt this Period 10.00

Earmarked for Robin Smith for Tennessee

**B.**

Full Name (Last, First, Middle Initial)  
Karen Kline

Mailing Address PO Box 3258

City Rancho Cordova State CA Zip Code 95741-3258

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 07 / 06 / 2010

**Transaction ID:** D62C19DCB844FA0C306

Amount of Each Receipt this Period 10.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Karen Kline

Mailing Address PO Box 3258

City Rancho Cordova State CA Zip Code 95741-3258

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 07 / 06 / 2010

**Transaction ID:** 997D41531B597D9007A

Amount of Each Receipt this Period 10.00

Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... 30.00

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

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

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

FOR LINE NUMBER: PAGE 82 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Karen Kline  
 Mailing Address PO Box 3258  
 City Rancho Cordova State CA Zip Code 95741-3258  
 Date of Receipt 07 / 06 / 2010  
**Transaction ID:** 97905DD3AF154CAFC6A  
 Amount of Each Receipt this Period 10.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer n/a Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 200.00  
 Earmarked for Kinzinger for Congress

**B.** Full Name (Last, First, Middle Initial)  
Christine M. Kohr  
 Mailing Address 554 Lexington St  
Espousal Gift Shop  
 City Waltham State MA Zip Code 02452-3029  
 Date of Receipt 07 / 08 / 2010  
**Transaction ID:** 8B296FDDE196017E851  
 Amount of Each Receipt this Period 35.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Stigmatine Fathers Occupation Gift Shop Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 70.00  
 Earmarked for Bachmann for Congress

**C.** Full Name (Last, First, Middle Initial)  
Joan Kondracki  
 Mailing Address 21 Whitcomb Ave  
 City Hingham State MA Zip Code 02043-3322  
 Date of Receipt 07 / 06 / 2010  
**Transaction ID:** 719DC8CA61536879987  
 Amount of Each Receipt this Period 25.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 75.00  
**[MEMO ITEM]**  
 Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 45.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 21 Whitcomb Ave

City Hingham State MA Zip Code 02043-3322

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 75.00

Date of Receipt 07 / 06 / 2010

**Transaction ID:** 93AF61F62D43EB43807

Amount of Each Receipt this Period 25.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

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

Mailing Address 1933 SE 32nd St

City Cape Coral State FL Zip Code 33904-4092

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

Name of Employer Self Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10.00

Date of Receipt 07 / 08 / 2010

**Transaction ID:** 491CBCF2A3CE28E43FE

Amount of Each Receipt this Period 10.00

Earmarked for Bachmann for Congress

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

Mailing Address 3401 Foster Rd

City White Oak State PA Zip Code 15131-1213

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

Name of Employer Jefferson Hills Surgical Specialists Occupation Surgeon

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 19 / 2010

**Transaction ID:** 77F48E49B6F4AC93BC6

Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **310.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)

Barbara Lacour

Mailing Address 21 Colonial Lane

City

Harahan

State

LA

Zip Code

70123-4608

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self employed

Occupation

Writer/Editor/Publicist

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	3	/	2	0	1	0

Transaction ID: F866C466C96123EDAD2

Amount of Each Receipt this Period

20.00

Earmarked for Friends of Sharron Angle

B.

Full Name (Last, First, Middle Initial)

Barbara Lacour

Mailing Address 21 Colonial Lane

City

Harahan

State

LA

Zip Code

70123-4608

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self employed

Occupation

Writer/Editor/Publicist

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	3	/	2	0	1	0

Transaction ID: D8E1EDAF25F8A7D487B

Amount of Each Receipt this Period

10.00

Earmarked for Jane Norton for Colorado Inc

C.

Full Name (Last, First, Middle Initial)

Barbara Lacour

Mailing Address 21 Colonial Lane

City

Harahan

State

LA

Zip Code

70123-4608

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self employed

Occupation

Writer/Editor/Publicist

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	3	/	2	0	1	0

Transaction ID: DD201D3FC2E033275BC

Amount of Each Receipt this Period

20.00

Earmarked for Carly for California Inc

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

50.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Barbara Lacour

Mailing Address 21 Colonial Lane

City State Zip Code  
Harahan LA 70123-4608

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

Name of Employer Occupation  
Self employed Writer/Editor/Publicist

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 150.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 03 / 2010

Transaction ID: 1FD8060805DD4FD5F94

Amount of Each Receipt this Period  
10.00

Earmarked for Kinzinger  
for Congress

**B.**

Full Name (Last, First, Middle Initial)

Barbara Lacour

Mailing Address 21 Colonial Lane

City State Zip Code  
Harahan LA 70123-4608

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

Name of Employer Occupation  
Self employed Writer/Editor/Publicist

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 150.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 03 / 2010

Transaction ID: F16815B57A3BB1C5A2B

Amount of Each Receipt this Period  
10.00

Earmarked for Candice Mil-  
ler for Congress

**C.**

Full Name (Last, First, Middle Initial)

Barbara Lacour

Mailing Address 21 Colonial Lane

City State Zip Code  
Harahan LA 70123-4608

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

Name of Employer Occupation  
Self employed Writer/Editor/Publicist

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 150.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 03 / 2010

Transaction ID: 5DF3233AFE5B09FC88B

Amount of Each Receipt this Period  
10.00

Earmarked for Friends of  
Joe Pitts

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

30.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 86 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Barbara Lacour

Mailing Address 21 Colonial Lane

City State Zip Code  
Harahan LA 70123-4608

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

Name of Employer Occupation  
Self employed Writer/Editor/Publicist

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 150.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 03 / 2010

Transaction ID: 9AD5F40CF066C2BB796

Amount of Each Receipt this Period  
10.00

Earmarked for Robin Smith for Tennessee

**B.**

Full Name (Last, First, Middle Initial)

Barbara Lacour

Mailing Address 21 Colonial Lane

City State Zip Code  
Harahan LA 70123-4608

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

Name of Employer Occupation  
Self employed Writer/Editor/Publicist

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 150.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 03 / 2010

Transaction ID: 7E0C4CA164C4006DE63

Amount of Each Receipt this Period  
20.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)

Barbara Lacour

Mailing Address 21 Colonial Lane

City State Zip Code  
Harahan LA 70123-4608

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

Name of Employer Occupation  
Self employed Writer/Editor/Publicist

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 150.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 03 / 2010

Transaction ID: 2E0E34EC17256F25D4A

Amount of Each Receipt this Period  
10.00

Earmarked for Jennifer Horn for Congress

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

40.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 21 Colonial Lane

City Harahan State LA Zip Code 70123-4608

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

Name of Employer Self employed Occupation Writer/Editor/Publicist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt 07 / 03 / 2010

**Transaction ID:** D8B32E9DF36ADB4AF0A

Amount of Each Receipt this Period 10.00

Earmarked for Sue Myrick for Congress

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

Mailing Address 6530 Powell St

City Downers Grove State IL Zip Code 60516-2720

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

Name of Employer MVP Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 35.00

Date of Receipt 07 / 08 / 2010

**Transaction ID:** 3939002159A1D377579

Amount of Each Receipt this Period 35.00

Earmarked for Bachmann for Congress

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

Mailing Address 8343 Hidden Hills Dr

City Las Vegas State NV Zip Code 89123-2346

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

Name of Employer n/a Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 130.00

Date of Receipt 07 / 06 / 2010

**Transaction ID:** 38CD79C2BCA4AE5F3C2

Amount of Each Receipt this Period 35.00

Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 80.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Kathleen Larmore  
Mailing Address 8343 Hidden Hills Dr  
City Las Vegas State NV Zip Code 89123-2346  
FEC ID number of contributing federal political committee. **C**  
Name of Employer n/a Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 130.00  
Date of Receipt 07 / 06 / 2010  
Transaction ID: 11D58A4195FB41E3E3A  
Amount of Each Receipt this Period 35.00  
Earmarked for Bachmann for Congress

**B.** Full Name (Last, First, Middle Initial)  
Kathleen Larmore  
Mailing Address 8343 Hidden Hills Dr  
City Las Vegas State NV Zip Code 89123-2346  
FEC ID number of contributing federal political committee. **C**  
Name of Employer n/a Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 130.00  
Date of Receipt 07 / 06 / 2010  
Transaction ID: 7612618BAD00588DC31  
Amount of Each Receipt this Period 35.00  
Earmarked for Friends of Sharron Angle

**C.** Full Name (Last, First, Middle Initial)  
Trudy Larson  
Mailing Address 1213 Salem St  
City North Andover State MA Zip Code 01845-4911  
FEC ID number of contributing federal political committee. **C**  
Name of Employer info requested Occupation info requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 160.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 2545A7F3F2802E14EE3  
Amount of Each Receipt this Period 60.00  
[MEMO ITEM]  
Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 70.00  
**TOTAL** This Period (last page this line number only) ..... ▶



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

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

FOR LINE NUMBER: PAGE 89 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 6535 Red Day Rd

City Martinsville State IN Zip Code 46151-7813

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 13 / 2010  
**Transaction ID:** B26DEE809CC5BB5CF0D  
 Amount of Each Receipt this Period 20.00

Earmarked for Carly for California Inc

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

Mailing Address 6535 Red Day Rd

City Martinsville State IN Zip Code 46151-7813

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 13 / 2010  
**Transaction ID:** 823A0CA2F984D1EB613  
 Amount of Each Receipt this Period 20.00

Earmarked for Friends of Sharron Angle

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

Mailing Address 23 Brigham Rd

City Worcester State MA Zip Code 01609-1005

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 12 / 2010  
**Transaction ID:** C9521ACD5E80A3B35FD  
 Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1040.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 90 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Raymond Lauring

Mailing Address 23 Brigham Rd

City Worcester State MA Zip Code 01609-1005

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 12 / 2010

**Transaction ID:** 253888712730A535885

Amount of Each Receipt this Period 500.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)  
Raymond Lauring

Mailing Address 23 Brigham Rd

City Worcester State MA Zip Code 01609-1005

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 12 / 2010

**Transaction ID:** 2545780C8ED3AC3FEB7

Amount of Each Receipt this Period 500.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**C.**

Full Name (Last, First, Middle Initial)  
Christine Lay

Mailing Address 718 W South St

City Upland State IN Zip Code 46989-9016

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

Name of Employer non-applicable Occupation homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 65.00

Date of Receipt 07 / 08 / 2010

**Transaction ID:** 5076CC39222AA4C1AE8

Amount of Each Receipt this Period 25.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 25.00

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

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

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

FOR LINE NUMBER: PAGE 91 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Janet L. Lederer  
 Mailing Address 120 Ponderosa Dr  
 City State Zip Code  
 Ridgway CO 81432-9418  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 20.00  
 Date of Receipt: 07 / 22 / 2010  
**Transaction ID:** 9D6FB9FF1051BE9969D  
 Amount of Each Receipt this Period: 20.00  
 Earmarked for Bachmann for Congress

**B.** Full Name (Last, First, Middle Initial)  
Elsie Y. Lewis  
 Mailing Address 607 Poia Rd  
 City State Zip Code  
 Sewickley PA 15143-1046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 None Housewife  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00  
 Date of Receipt: 07 / 06 / 2010  
**Transaction ID:** E9C5F998110887CBAF5  
 Amount of Each Receipt this Period: 100.00  
 Earmarked for Friends of Sharron Angle

**C.** Full Name (Last, First, Middle Initial)  
Elsie Y. Lewis  
 Mailing Address 607 Poia Rd  
 City State Zip Code  
 Sewickley PA 15143-1046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 None Housewife  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00  
 Date of Receipt: 07 / 06 / 2010  
**Transaction ID:** 4469022C9596FDFB236  
 Amount of Each Receipt this Period: 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 220.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Elsie Y. Lewis	Date of Receipt MM / DD / YYYY 07 / 06 / 2010
	Mailing Address 607 Poia Rd	<b>Transaction ID:</b> A74D00771ECCBD80377
	City State Zip Code Sewickley PA 15143-1046	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer None	Occupation Housewife	Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Daniel Francis Lieuwen	Date of Receipt MM / DD / YYYY 07 / 26 / 2010
	Mailing Address PO Box 237	<b>Transaction ID:</b> 9E38199E12BA82059D0
	City State Zip Code Somerville NJ 08876-0237	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Google	Occupation Computer Science	Earmarked for Kristi for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Daniel Francis Lieuwen	Date of Receipt MM / DD / YYYY 07 / 26 / 2010
	Mailing Address PO Box 237	<b>Transaction ID:</b> DB877BC0B2E6F3CEFFE
	City State Zip Code Somerville NJ 08876-0237	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Google	Occupation Computer Science	Earmarked for Diane Black for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 93 / 344  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 0F732DC624B0B2BC45F  
Amount of Each Receipt this Period 50.00  
Earmarked for Star Parker for Congress 2010

**B.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: AFCED3B1715C90AF02B  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: D24421FDC623C268159  
Amount of Each Receipt this Period 50.00  
Earmarked for Virginia Foxx for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 350.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen

Mailing Address PO Box 237

City State Zip Code  
Somerville NJ 08876-0237

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

Name of Employer Occupation  
Google Computer Science

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2010

Transaction ID: B848DD67CDD9B69309B

Amount of Each Receipt this Period

50.00

Earmarked for Steve Chabot for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen

Mailing Address PO Box 237

City State Zip Code  
Somerville NJ 08876-0237

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

Name of Employer Occupation  
Google Computer Science

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2010

Transaction ID: 905D8CEAAF602508CDF

Amount of Each Receipt this Period

50.00

Earmarked for Marsha Blackburn for Congress Inc.

**C.**

Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen

Mailing Address PO Box 237

City State Zip Code  
Somerville NJ 08876-0237

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

Name of Employer Occupation  
Google Computer Science

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2010

Transaction ID: E6F128B73A7F81391F3

Amount of Each Receipt this Period

50.00

Earmarked for Schmidt for Congress Committee

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

150.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 95 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SUSAN B ANTHONY LIST INC. CANDIDATE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen

Mailing Address PO Box 237

City State Zip Code  
**Somerville NJ 08876-0237**

FEC ID number of contributing federal political committee. C

Name of Employer Google Occupation Computer Science

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt MM / DD / YYYY  
07 / 26 / 2010

**Transaction ID:** 5AF46B52395972B82EB

Amount of Each Receipt this Period 50.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen

Mailing Address PO Box 237

City State Zip Code  
**Somerville NJ 08876-0237**

FEC ID number of contributing federal political committee. C

Name of Employer Google Occupation Computer Science

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt MM / DD / YYYY  
07 / 26 / 2010

**Transaction ID:** 7C765055A94C789F84D

Amount of Each Receipt this Period 50.00

Earmarked for Jaime Herre-  
ra for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen

Mailing Address PO Box 237

City State Zip Code  
**Somerville NJ 08876-0237**

FEC ID number of contributing federal political committee. C

Name of Employer Google Occupation Computer Science

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt MM / DD / YYYY  
07 / 26 / 2010

**Transaction ID:** 464CB81C4AE6DD89B15

Amount of Each Receipt this Period 50.00

Earmarked for Jennifer Ho-  
rn for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... 150.00

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

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

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

FOR LINE NUMBER: PAGE 96 / 344  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 9825B7A6072E0B75F4D  
Amount of Each Receipt this Period 50.00  
Earmarked for Candice Miller for Congress

**B.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: C05DA5677DEBB9768C4  
Amount of Each Receipt this Period 50.00  
Earmarked for Robin Smith for Tennessee

**C.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: AF2D3F4F1DC5B8E8F9D  
Amount of Each Receipt this Period 50.00  
Earmarked for Walorski for Congress Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00  
**TOTAL** This Period (last page this line number only) ..... ►



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

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

FOR LINE NUMBER: PAGE 97 / 344  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 7E2BBE193D3D83EF32E  
Amount of Each Receipt this Period 50.00  
Earmarked for Renee Ellmers for Congress Committee

**B.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 3F7647A45EA85B683BA  
Amount of Each Receipt this Period 50.00  
Earmarked for Carly for California Inc

**C.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 34E6447B8C68BB1D2CB  
Amount of Each Receipt this Period 50.00  
Earmarked for Dan Coats for Indiana

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 98 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 65062A3DF18118EE2CB  
Amount of Each Receipt this Period 50.00  
Earmarked for lott for Co-  
ngress 2010

**B.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 3276C2BFC291CCF61BE  
Amount of Each Receipt this Period 50.00  
Earmarked for Mike Kelly  
for Congress

**C.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 4B1FF78118C84BE5D65  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 200.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 99 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 67083BAB2C160D59AFE  
Amount of Each Receipt this Period 50.00  
Earmarked for Sue Myrick for Congress

**B.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 1549984073FBA5689CB  
Amount of Each Receipt this Period 50.00  
Earmarked for Cathy McMorris Rodgers for Congress

**C.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 06BD730C86414AA71A1  
Amount of Each Receipt this Period 50.00  
Earmarked for Friends of Joe Pitts

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 100 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Daniel Francis Lieuwen

Mailing Address PO Box 237

City

Somerville

State

NJ

Zip Code

08876-0237

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Google

Occupation  
Computer Science

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

MM / DD / YYYY  
07 / 26 / 2010

Transaction ID: 85177E9EBE81393FAB3

Amount of Each Receipt this Period

50.00

Earmarked for Kinzinger for Congress

**B.**

Full Name (Last, First, Middle Initial)

Daniel Francis Lieuwen

Mailing Address PO Box 237

City

Somerville

State

NJ

Zip Code

08876-0237

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Google

Occupation  
Computer Science

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

MM / DD / YYYY  
07 / 26 / 2010

Transaction ID: 9C10D795034A596821A

Amount of Each Receipt this Period

100.00

Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)

Daniel Francis Lieuwen

Mailing Address PO Box 237

City

Somerville

State

NJ

Zip Code

08876-0237

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Google

Occupation  
Computer Science

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

MM / DD / YYYY  
07 / 26 / 2010

Transaction ID: F721B6B8529A93EF990

Amount of Each Receipt this Period

50.00

Earmarked for Ros-Lehtinen for Congress

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

200.00

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

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

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

FOR LINE NUMBER: PAGE 101 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 0FBBE3EDF919E34CDD8  
Amount of Each Receipt this Period 50.00  
Earmarked for Ann Marie Buerkle for Congress

**B.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 47263D4793A75FCB4C3  
Amount of Each Receipt this Period 50.00  
Earmarked for Jane Norton for Colorado Inc

**C.** Full Name (Last, First, Middle Initial)  
Daniel Francis Lieuwen  
Mailing Address PO Box 237  
City Somerville State NJ Zip Code 08876-0237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Google Occupation Computer Science  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 0E004C7C7DD9132482A  
Amount of Each Receipt this Period 50.00  
Earmarked for Lummis for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SUSAN B ANTHONY LIST INC. CANDIDATE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
Norma Llorca

Mailing Address 9861 NW 18th Mnr

City State Zip Code  
Plantation FL 33322-7601

FEC ID number of contributing federal political committee. C

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 21 / 2010

**Transaction ID:** OAAC56853AB5C65C500

Amount of Each Receipt this Period 20.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Norma Llorca

Mailing Address 9861 NW 18th Mnr

City State Zip Code  
Plantation FL 33322-7601

FEC ID number of contributing federal political committee. C

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 21 / 2010

**Transaction ID:** BCEF500052143126C1A

Amount of Each Receipt this Period 20.00

Earmarked for Ros-Lehtinen for Congress

**C.**

Full Name (Last, First, Middle Initial)  
James P. Lukavsky, MD

Mailing Address 1756 Bee Creek Rd

City State Zip Code  
Branson MO 65616-9395

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Family Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 08 / 2010

**Transaction ID:** 61E76CC89223CCA2D2E

Amount of Each Receipt this Period 100.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... 140.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 103 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Donna Lyons

Mailing Address 3 Bride Hill Dr

City State Zip Code  
Hampton NH 03842-1006

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

Name of Employer Occupation  
Self-employed RE

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 40.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2010

Transaction ID: 7029FC67DE9B1E16DBD

Amount of Each Receipt this Period  
20.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
John Mack

Mailing Address 7841 Dogwood Ln

City State Zip Code  
Parma OH 44130-6142

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

Name of Employer Occupation  
R. T. Patterson Co., Inc. Engineer

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 60.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2010

Transaction ID: 6B0104DE20A8C4FE0E5

Amount of Each Receipt this Period  
15.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Teresa A. Maday

Mailing Address 15W151 60th St

City State Zip Code  
Burr Ridge IL 60527-5240

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

Name of Employer Occupation  
info requested info requested

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 50.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2010

Transaction ID: F4C5A9AAB92667B3A8A

Amount of Each Receipt this Period  
25.00

Earmarked for Carly for California Inc

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

60.00

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

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

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

FOR LINE NUMBER: PAGE 104 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Teresa A. Maday  
Mailing Address 15W151 60th St  
City Burr Ridge State IL Zip Code 60527-5240  
FEC ID number of contributing federal political committee. **C**  
Name of Employer info requested Occupation info requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00  
Date of Receipt 07 / 13 / 2010  
Transaction ID: 87300D974FD31CD65  
Amount of Each Receipt this Period 25.00  
Earmarked for Friends of Sharron Angle

**B.** Full Name (Last, First, Middle Initial)  
Edwin Madeiros  
Mailing Address 781 Dubanski Dr  
City San Jose State CA Zip Code 95123-4547  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ron Kehl Engineering Occupation machine operator  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 60.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: 78E8FF2F41D21E5D978  
Amount of Each Receipt this Period 30.00  
Earmarked for Bachmann for Congress

**C.** Full Name (Last, First, Middle Initial)  
Gerard W. Maestretti  
Mailing Address 7549 Rubens Pkwy  
City Sacramento State CA Zip Code 95823-3717  
FEC ID number of contributing federal political committee. **C**  
Name of Employer California DMV Occupation Office Tech  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 35.00  
Date of Receipt 07 / 12 / 2010  
Transaction ID: D83B9538BDD143A0D00  
Amount of Each Receipt this Period 35.00  
Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 90.00  
**TOTAL** This Period (last page this line number only) ..... ►



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Merlyn M. Maillian

Mailing Address 8 Holly Dr

City State Zip Code  
Gretna LA 70053-4822

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

Name of Employer Occupation  
retired retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 80.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2010

Transaction ID: 0D3D0DC5E353A74231B

Amount of Each Receipt this Period  
20.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**B.**

Full Name (Last, First, Middle Initial)  
Merlyn M. Maillian

Mailing Address 8 Holly Dr

City State Zip Code  
Gretna LA 70053-4822

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

Name of Employer Occupation  
retired retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 80.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2010

Transaction ID: 3AB352BF310BD5A6C30

Amount of Each Receipt this Period  
20.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Rebecca Maki

Mailing Address 7572 Meadowview Rd NW

City State Zip Code  
Solway MN 56678-4333

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

Name of Employer Occupation  
Miller, McDonald, Inc. Accountant

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 50.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2010

Transaction ID: 3DEEC2C979A07591307

Amount of Each Receipt this Period  
50.00

Earmarked for Bachmann for Congress

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

50.00

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

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

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

FOR LINE NUMBER: PAGE 106 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Robert Martinez  
 Mailing Address 13200 Ponderosa Way  
 City State Zip Code  
 Fort Myers FL 33907-7850  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 08 / 2010  
**Transaction ID:** 6B877D3F02CD6508445  
 Amount of Each Receipt this Period  
 50.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation MD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50.00  
 Earmarked for Bachmann for Congress

**B.** Full Name (Last, First, Middle Initial)  
Philip Mason  
 Mailing Address 4404 Lafayette St  
 City State Zip Code  
 Bellaire TX 77401-5633  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 08 / 2010  
**Transaction ID:** D260B75C52EC8F7C66B  
 Amount of Each Receipt this Period  
 50.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Salient Partners Occupation Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 85.00  
 Earmarked for Bachmann for Congress

**C.** Full Name (Last, First, Middle Initial)  
Helen Mayo  
 Mailing Address 11953 Childs Ave  
 City State Zip Code  
 Le Grand CA 95333-9797  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 26 / 2010  
**Transaction ID:** 758A974CDE0DD58BFD7  
 Amount of Each Receipt this Period  
 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Counselor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00  
 Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ► 200.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 107 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 5104 Vale Court Southeast

City Olympia State WA Zip Code 98513-4675

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

Name of Employer PSPH Occupation Nurse

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 02 / 2010  
**Transaction ID:** D9C4F1B2902ECE27247

Amount of Each Receipt this Period 200.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

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

Mailing Address 5104 Vale Court Southeast

City Olympia State WA Zip Code 98513-4675

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

Name of Employer PSPH Occupation Nurse

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 02 / 2010  
**Transaction ID:** B6E2CF82A3919027F79

Amount of Each Receipt this Period 200.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

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

Mailing Address 151 Flint Locke Dr

City Duxbury State MA Zip Code 02332-4821

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

Name of Employer information requested Occupation information requested

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 145.00

Date of Receipt 07 / 13 / 2010  
**Transaction ID:** 024D35578870338E7F1

Amount of Each Receipt this Period 55.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial) Carole McCarthy		Date of Receipt MM / DD / YYYY 07 / 13 / 2010
Mailing Address 151 Flint Locke Dr		<b>Transaction ID:</b> 41D07F99F331FD64F27
City Duxbury	State Zip Code MA 02332-4821	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer information requested	Occupation information requested	<b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 145.00	

**B.**

Full Name (Last, First, Middle Initial) Dennis McDonald		Date of Receipt MM / DD / YYYY 07 / 26 / 2010
Mailing Address 410 NE Highway J		<b>Transaction ID:</b> F2FDF322849358E7175
City Galt	State Zip Code MO 64641-9113	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer self	Occupation farmer	Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00	

**C.**

Full Name (Last, First, Middle Initial) Dennis McDonald		Date of Receipt MM / DD / YYYY 07 / 26 / 2010
Mailing Address 410 NE Highway J		<b>Transaction ID:</b> EBD362070D9718C31FA
City Galt	State Zip Code MO 64641-9113	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer self	Occupation farmer	Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	50.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Helen S. McDonough	Date of Receipt MM / DD / YYYY 07 / 08 / 2010
	Mailing Address 15215 Broadway Rd	<b>Transaction ID:</b> 74B738AB10DF794B157
	City Onancock State VA Zip Code 23417-3111	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	Earmarked for Bachmann for Congress
Name of Employer VA Doc Occupation Secretary	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 35.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Janette McDugald	Date of Receipt MM / DD / YYYY 07 / 08 / 2010
	Mailing Address 1116 Glenbrook Dr	<b>Transaction ID:</b> 4D95991627B8B64B609
	City Franklin State TN Zip Code 37064-2958	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Earmarked for Bachmann for Congress
Name of Employer Restaurant & Retail Consulting, Inc. Occupation Financial Consultant	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Laurie McInerney	Date of Receipt MM / DD / YYYY 07 / 21 / 2010
	Mailing Address 701 N Church St	<b>Transaction ID:</b> 37A17122600EDBC9F0F
	City Decatur State TX Zip Code 76234-1105	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	Earmarked for Friends of Sharron Angle
Name of Employer Ready Start Inc Occupation Speech Pathologist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 110 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Yunyong McLain

Mailing Address 970 Mobley Rd

City Cedar Hill State TX Zip Code 75104-1519

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

Name of Employer Self Occupation Mother

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 70.00

Date of Receipt 07 / 08 / 2010

Transaction ID: 27D61E4273CAC629770

Amount of Each Receipt this Period 35.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Louise C Meehan

Mailing Address 621 W Ellis Avenue

City Inglewood State CA Zip Code 90302-1004

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

Name of Employer God Occupation Pro-Life Volunteer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 120.00

Date of Receipt 07 / 03 / 2010

Transaction ID: 931005E6D91EA8AC83C

Amount of Each Receipt this Period 50.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Louise C Meehan

Mailing Address 621 W Ellis Avenue

City Inglewood State CA Zip Code 90302-1004

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

Name of Employer God Occupation Pro-Life Volunteer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 120.00

Date of Receipt 07 / 03 / 2010

Transaction ID: 28E8DCF8404E06AC93E

Amount of Each Receipt this Period 35.00

Earmarked for Sue Myrick for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► **120.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 111 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SUSAN B ANTHONY LIST INC. CANDIDATE FUND**

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

Mailing Address **621 W Ellis Avenue**

City **Inglewood** State **CA** Zip Code **90302-1004**

FEC ID number of contributing federal political committee. C

Name of Employer  
God

Occupation  
Pro-Life Volunteer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 120.00

Date of Receipt  
07 / 03 / 2010

**Transaction ID:** E130DC379AD2C0CB008

Amount of Each Receipt this Period  
35.00

Earmarked for Friends of Joe Pitts

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

Mailing Address **708 Graham Pl Apt 102**

City **Austin** State **TX** Zip Code **78705-4433**

FEC ID number of contributing federal political committee. C

Name of Employer  
NA

Occupation  
Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt  
07 / 08 / 2010

**Transaction ID:** 1E0C508AEF531002B00

Amount of Each Receipt this Period  
10.00

Earmarked for Bachmann for Congress

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

Mailing Address **2805 SW Emerald Creek Pl**

City **Blue Springs** State **MO** Zip Code **64015-8890**

FEC ID number of contributing federal political committee. C

Name of Employer  
not currently employed

Occupation  
not currently employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt  
07 / 09 / 2010

**Transaction ID:** 128A179DD5F42D577C1

Amount of Each Receipt this Period  
50.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... 95.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 112 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
William Micka

Mailing Address 51 Windsor Dr

City State Zip Code  
Belleville IL 62223-2146

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15.00

Date of Receipt: 07 / 26 / 2010

Transaction ID: 8C027397B10602F181C

Amount of Each Receipt this Period: 15.00

Earmarked for Carly for California Inc

**B.**

Full Name (Last, First, Middle Initial)  
Marion Miller

Mailing Address 15210 Northwest Rd

City State Zip Code  
Whitehouse TX 75791-6004

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 45.00

Date of Receipt: 07 / 08 / 2010

Transaction ID: 1464C3958387608085B

Amount of Each Receipt this Period: 25.00

Earmarked for Bachmann for Congress

**C.**

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

Mailing Address 3914 Vineland Ave

City State Zip Code  
Baldwin Park CA 91706-4338

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 75.00

Date of Receipt: 07 / 13 / 2010

Transaction ID: 20337FD0E84E2CC35DF

Amount of Each Receipt this Period: 75.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ► 40.00

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



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

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

FOR LINE NUMBER: PAGE 113 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Mary Minnet  
Mailing Address 2143 NE 58th Ct  
City Fort Lauderdale State FL Zip Code 33308-2531  
FEC ID number of contributing federal political committee. **C**  
Name of Employer information requested Occupation information requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 60.00  
Date of Receipt 07 / 13 / 2010  
Transaction ID: A6D1AAB4A029E68007F  
Amount of Each Receipt this Period 60.00  
Earmarked for Carly for California Inc

**B.** Full Name (Last, First, Middle Initial)  
Dominick Minni  
Mailing Address 2103 Ambassador Ct # 2  
City Somerset State NJ Zip Code 08873-6093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer info requested Occupation info requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00  
Date of Receipt 07 / 06 / 2010  
Transaction ID: 721FED30588B7C9E9EA  
Amount of Each Receipt this Period 40.00  
Earmarked for Carly for California Inc

**C.** Full Name (Last, First, Middle Initial)  
Dominick Minni  
Mailing Address 2103 Ambassador Ct # 2  
City Somerset State NJ Zip Code 08873-6093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer info requested Occupation info requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00  
Date of Receipt 07 / 06 / 2010  
Transaction ID: 55007BF562B12867FD8  
Amount of Each Receipt this Period 60.00  
Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 160.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 114 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Elena Miyares

Mailing Address 6321 13th Ave N

City State Zip Code  
Saint Petersburg FL 33710-5507

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

Name of Employer N/A Occupation Retired Dentist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt MM / DD / YYYY  
07 / 06 / 2010

**Transaction ID:** 68BF69902251DFA5649

Amount of Each Receipt this Period 50.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)  
Frank Montez

Mailing Address 351 SW 40th St

City State Zip Code  
San Antonio TX 78237-2254

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

Name of Employer Labor Ready Occupation Laborer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 95.00

Date of Receipt MM / DD / YYYY  
07 / 10 / 2010

**Transaction ID:** 937A5FC828B183849C8

Amount of Each Receipt this Period 50.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Angela Montgomery

Mailing Address 209 Green Pond Rd

City State Zip Code  
Johnson City TN 37604-2227

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

Name of Employer n/a Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 70.00

Date of Receipt MM / DD / YYYY  
07 / 03 / 2010

**Transaction ID:** 6277D3EC2A3FF2AB8CD

Amount of Each Receipt this Period 35.00

Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 85.00

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

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

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

FOR LINE NUMBER: PAGE 115 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Angela Montgomery  
Mailing Address 209 Green Pond Rd  
City Johnson City State TN Zip Code 37604-2227  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Unemployed Occupation Disabled  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: CE9AE4DC0ABE8124BDE  
Amount of Each Receipt this Period 50.00  
Earmarked for Bachmann for Congress

**B.** Full Name (Last, First, Middle Initial)  
Edward P. Mooney  
Mailing Address 51 Sagewood Dr  
City Malvern State PA Zip Code 19355-2234  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: 2227D5318D6FBB430C0  
Amount of Each Receipt this Period 500.00  
[MEMO ITEM] Earmarked for Carly for California Inc

**C.** Full Name (Last, First, Middle Initial)  
Edward P. Mooney  
Mailing Address 51 Sagewood Dr  
City Malvern State PA Zip Code 19355-2234  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: B59D8599F3A2634ABE1  
Amount of Each Receipt this Period 500.00  
[MEMO ITEM] Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 50.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 116 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Susan Morgan  
 Mailing Address 314 Larchbrook Dr  
 City State Zip Code  
 Garland TX 75043-5520  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 08 / 2010  
**Transaction ID:** 86D92031B08CC860894  
 Amount of Each Receipt this Period  
 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation N/A  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00  
 Earmarked for Bachmann for Congress

**B.** Full Name (Last, First, Middle Initial)  
Clifton Morris  
 Mailing Address 2725 Nazareth Rd  
 City State Zip Code  
 Easton PA 18045-2716  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 26 / 2010  
**Transaction ID:** A5D05715D2CBFB1B0CC  
 Amount of Each Receipt this Period  
 35.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 120.00  
 Earmarked for Carly for California Inc

**C.** Full Name (Last, First, Middle Initial)  
Clifton Morris  
 Mailing Address 2725 Nazareth Rd  
 City State Zip Code  
 Easton PA 18045-2716  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 26 / 2010  
**Transaction ID:** 9ED95917782C9FDA75D  
 Amount of Each Receipt this Period  
 35.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 120.00  
 Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 170.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 117 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
John Morton

Mailing Address PO Box 1968

City Yuma State AZ Zip Code 85366-2389

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** 53FD0A9F27BC441EE39

Amount of Each Receipt this Period 25.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**B.**

Full Name (Last, First, Middle Initial)  
John Morton

Mailing Address PO Box 1968

City Yuma State AZ Zip Code 85366-2389

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** 87650DDDD111FFF4F1C

Amount of Each Receipt this Period 25.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Gregory Mueller

Mailing Address 11505 Valor Bridge Ct

City Spotsylvania State VA Zip Code 22551-4699

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

Name of Employer CRC Public Relations Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 14 / 2010

**Transaction ID:** 1D0F2A3310426DFE0AC

Amount of Each Receipt this Period 1000.00

Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 118 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial) Tate Nagengast		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
Mailing Address 20525 150th Ave N		<b>Transaction ID:</b> 00969D9FEF01D2CC8BE
City Rogers	State Zip Code MN 55374-9458	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer General Mills	Occupation Manager	Earmarked for Bachmann for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 35.00	

**B.**

Full Name (Last, First, Middle Initial) Henry M. Neumann		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 622 Webster Dr		<b>Transaction ID:</b> DE5876D4A14533D0478
City Decatur	State Zip Code GA 30033-5432	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

**C.**

Full Name (Last, First, Middle Initial) Henry M. Neumann		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 622 Webster Dr		<b>Transaction ID:</b> 669255098A11067F2D1
City Decatur	State Zip Code GA 30033-5432	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	35.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 119 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Henry M. Neumann

Mailing Address 622 Webster Dr

City State Zip Code  
Decatur GA 30033-5432

FEC ID number of contributing federal political committee. C

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      300.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 14 / 2010

**Transaction ID:** 08F7C4E122770C70BD7

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Brian & Esther Newton

Mailing Address 1428 Palm Ave  
Apt E

City State Zip Code  
San Gabriel CA 91776-3364

FEC ID number of contributing federal political committee. C

Name of Employer omf international      Occupation missionaries

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      35.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 09 / 2010

**Transaction ID:** 0527EBCFC6F87C1CA11

Amount of Each Receipt this Period  
35.00

Earmarked for Bachmann for Congress

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

Mailing Address 213 Forest Ave

City State Zip Code  
Altamonte Springs FL 32701-3671

FEC ID number of contributing federal political committee. C

Name of Employer Jim Kim Gall Enterprise      Occupation Laborer

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      100.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 13 / 2010

**Transaction ID:** F9B065A219B5E6AE02E

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... 185.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 120 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Joseph Nicholas

Mailing Address 213 Forest Ave

City Altamonte Springs State FL Zip Code 32701-3671

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

Name of Employer Jim Kim Gall Enterprise Occupation Laborer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** FE565EDE9D883DC0EF1

Amount of Each Receipt this Period 50.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)  
Alice Nichols

Mailing Address 4110 Whorton Bend Rd

City Gadsden State AL Zip Code 35901-8867

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

Name of Employer retired Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 70.00

Date of Receipt 07 / 21 / 2010

**Transaction ID:** 2EBE38EB4FF5B928DC2

Amount of Each Receipt this Period 35.00

Earmarked for Carly for California Inc

**C.**

Full Name (Last, First, Middle Initial)  
Alice Nichols

Mailing Address 4110 Whorton Bend Rd

City Gadsden State AL Zip Code 35901-8867

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

Name of Employer retired Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 70.00

Date of Receipt 07 / 21 / 2010

**Transaction ID:** DFEBDE13DE2950064BE

Amount of Each Receipt this Period 35.00

Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 70.00

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



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

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

FOR LINE NUMBER: PAGE 121 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Bettina Nolan

Mailing Address 7205 Laketree Dr

City Raleigh State NC Zip Code 27615-3428

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

Name of Employer Corvitex Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00

Date of Receipt

MM / DD / YYYY  
07 / 03 / 2010

Transaction ID: ACB14F4BAE88CFB5498

Amount of Each Receipt this Period  
20.00

Earmarked for Sue Myrick for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Bettina Nolan

Mailing Address 7205 Laketree Dr

City Raleigh State NC Zip Code 27615-3428

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

Name of Employer Corvitex Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00

Date of Receipt

MM / DD / YYYY  
07 / 03 / 2010

Transaction ID: FFA4137A8966FC78921

Amount of Each Receipt this Period  
20.00

Earmarked for Carly for California Inc

**C.**

Full Name (Last, First, Middle Initial)  
Bettina Nolan

Mailing Address 7205 Laketree Dr

City Raleigh State NC Zip Code 27615-3428

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

Name of Employer Corvitex Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00

Date of Receipt

MM / DD / YYYY  
07 / 03 / 2010

Transaction ID: 38ECDF99C1B8FA88D48

Amount of Each Receipt this Period  
20.00

Earmarked for Friends of Sharron Angle

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

60.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 122 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Bettina Nolan

Mailing Address 7205 Laketree Dr

City Raleigh State NC Zip Code 27615-3428

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

Name of Employer Corvitex Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 03 / 2010

**Transaction ID:** 85D86B1627A9CAE363A

Amount of Each Receipt this Period 20.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Adam Olis

Mailing Address 475 Georgiana Way

City Wadsworth State OH Zip Code 44281-8577

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

Name of Employer retired Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 07 / 02 / 2010

**Transaction ID:** 53D57F1C7064035181D

Amount of Each Receipt this Period 50.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Adam Olis

Mailing Address 475 Georgiana Way

City Wadsworth State OH Zip Code 44281-8577

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

Name of Employer retired Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 07 / 02 / 2010

**Transaction ID:** 0D4085933C02C2A90DB

Amount of Each Receipt this Period 50.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ► 20.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 123 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Suzanne Paradis

Mailing Address 72 Oak Ridge Dr

City Windsor Locks State CT Zip Code 06096-2667

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

Name of Employer Primary Eye Care Center Occupation Ophthalmic Technician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 70.00

Date of Receipt 07 / 08 / 2010

Transaction ID: B6A1007D71B14A56542

Amount of Each Receipt this Period 35.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Shawn Paretti

Mailing Address 100 Thatcher Dr

City Slidell State LA Zip Code 70461-3912

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

Name of Employer Claims Department Manager Occupation Lammico

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 13 / 2010

Transaction ID: 76FBD012D9D42D57DD8

Amount of Each Receipt this Period 25.00

Earmarked for Carly for California Inc

**C.**

Full Name (Last, First, Middle Initial)  
Shawn Paretti

Mailing Address 100 Thatcher Dr

City Slidell State LA Zip Code 70461-3912

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

Name of Employer Claims Department Manager Occupation Lammico

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 13 / 2010

Transaction ID: F4091019C26EF221AEF

Amount of Each Receipt this Period 25.00

Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 85.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 124 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Richard Park

Mailing Address 3614 Tanner Ln

City Richardson State TX Zip Code 75082-2617

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

Name of Employer Retired Occupation Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 08 / 2010

**Transaction ID:** 91AF7A14476E5C94B6E

Amount of Each Receipt this Period 100.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Constance Pauwels

Mailing Address 4635 Cinnamon Ln

City Rockford State IL Zip Code 61114-5327

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

Name of Employer None Occupation Housewife

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** 21793A440F0206B8352

Amount of Each Receipt this Period 50.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**C.**

Full Name (Last, First, Middle Initial)  
Constance Pauwels

Mailing Address 4635 Cinnamon Ln

City Rockford State IL Zip Code 61114-5327

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

Name of Employer None Occupation Housewife

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** 467B4FDF36EB39094D6

Amount of Each Receipt this Period 50.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 100.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 125 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Frank J. Person

Mailing Address 6112 Constellation Dr

City State Zip Code  
Fort Collins CO 80525-4068

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

Name of Employer Retired Occupation Electrician

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 70.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 12 / 2010

Transaction ID: D00B9FAC94947673C6F

Amount of Each Receipt this Period

35.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Edward S. Petraitis

Mailing Address 44 Stone Path Ln

City State Zip Code  
West Springfield MA 01089-1671

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 60.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 26 / 2010

Transaction ID: 500BC3077562CC19D3E

Amount of Each Receipt this Period

30.00

[MEMO ITEM]  
Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Edward S. Petraitis

Mailing Address 44 Stone Path Ln

City State Zip Code  
West Springfield MA 01089-1671

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 60.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 26 / 2010

Transaction ID: AFC888322BDD631BA6C

Amount of Each Receipt this Period

30.00

[MEMO ITEM]  
Earmarked for Carly for California Inc

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

35.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 / 344
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Bonnie A Pfaff	Date of Receipt MM / DD / YYYY 07 / 22 / 2010
	Mailing Address N732 State Road 108	<b>Transaction ID:</b> 71012C0C4ED9F3280B3
	City State Zip Code Melrose WI 54642-8219	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Diocese of Lacrosse Clerk Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00	Earmarked for Bachmann for Congress

<b>B.</b>	Full Name (Last, First, Middle Initial) George Pfaff	Date of Receipt MM / DD / YYYY 07 / 15 / 2010
	Mailing Address 16 Beaver Creek Ln	<b>Transaction ID:</b> 1E7306A33E6C78F0CC4
	City State Zip Code Asheville NC 28804-2765	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Plunkett	Date of Receipt MM / DD / YYYY 07 / 13 / 2010
	Mailing Address 6200 Northern Blvd # 25A	<b>Transaction ID:</b> A16B2A140108F4296EF
	City State Zip Code East Norwich NY 11732-1631	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 150.00	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 127 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial) Michael Plunkett		Date of Receipt MM / DD / YYYY 07 / 13 / 2010
Mailing Address 6200 Northern Blvd # 25A		<b>Transaction ID:</b> 66475051A291146CC83
City East Norwich	State Zip Code NY 11732-1631	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

**B.**

Full Name (Last, First, Middle Initial) Raymond W. Podmenik		Date of Receipt MM / DD / YYYY 07 / 26 / 2010
Mailing Address 4342 Mystic Ct		<b>Transaction ID:</b> 7C400BAA79093A8C6B9
City Las Cruces	State Zip Code NM 88011-7537	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 80.00	

**C.**

Full Name (Last, First, Middle Initial) Raymond W. Podmenik		Date of Receipt MM / DD / YYYY 07 / 26 / 2010
Mailing Address 4342 Mystic Ct		<b>Transaction ID:</b> EFEFBA96D3EDCDD58E3
City Las Cruces	State Zip Code NM 88011-7537	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 80.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 / 344
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Karen Pomes		Date of Receipt
	Mailing Address 3206 Norfolk St Apt 14207		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 06 / 2010
	City	State	Zip Code
	Houston	TX	77098-3809
	FEC ID number of contributing federal political committee.		Transaction ID: 0826DA9A59F1C3FBAB0
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Amgen		Occupation Biopharmaceutical Sales Representative	<input type="text"/> 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 350.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Karen Pomes		Date of Receipt
	Mailing Address 3206 Norfolk St Apt 14207		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 06 / 2010
	City	State	Zip Code
	Houston	TX	77098-3809
	FEC ID number of contributing federal political committee.		Transaction ID: D4D554DECF8F358B745
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Amgen		Occupation Biopharmaceutical Sales Representative	<input type="text"/> 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 350.00	

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

<b>C.</b>	Full Name (Last, First, Middle Initial) Dorothy Popovich		Date of Receipt
	Mailing Address 922 Wexford Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 13 / 2010
	City	State	Zip Code
	Rochester Hills	MI	48307-2972
	FEC ID number of contributing federal political committee.		Transaction ID: B54B2FE33DD351DC360
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer None		Occupation Retired	<input type="text"/> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 150.00	

Earmarked for Carly for California Inc

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 150.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

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

FOR LINE NUMBER: PAGE 129 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 922 Wexford Way

City State Zip Code  
Rochester Hills MI 48307-2972

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt MM / DD / YYYY  
07 / 13 / 2010

**Transaction ID:** 7A5EFCDE8912A4FB81D

Amount of Each Receipt this Period 50.00

Earmarked for Friends of Sharron Angle

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

Mailing Address W7124 Saint Johns Church Rd

City State Zip Code  
Clintonville WI 54929-8203

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

Name of Employer information requested Occupation information requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt MM / DD / YYYY  
07 / 06 / 2010

**Transaction ID:** 04DDDF1283B5AE5C18F7

Amount of Each Receipt this Period 50.00

Earmarked for Carly for California Inc

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

Mailing Address W7124 Saint Johns Church Rd

City State Zip Code  
Clintonville WI 54929-8203

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

Name of Employer information requested Occupation information requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt MM / DD / YYYY  
07 / 06 / 2010

**Transaction ID:** 4542BB57B58092B739C

Amount of Each Receipt this Period 50.00

Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00

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

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

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

FOR LINE NUMBER: PAGE 130 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Mallory Quigley  
 Mailing Address 21412 Sawgrass Drive  
 City Gaithersburg State MD Zip Code 20886  
 Date of Receipt 07 / 08 / 2010  
**Transaction ID:** 0BEA7795E3BC5F8F7D6  
 Amount of Each Receipt this Period 10.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Susan B. Anthony List Occupation New Media  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 10.00  
 Earmarked for Bachmann for Congress

**B.** Full Name (Last, First, Middle Initial)  
David Quinlan  
 Mailing Address N4404 Lakeshore Dr  
 City Kewaunee State WI Zip Code 54216-9726  
 Date of Receipt 07 / 13 / 2010  
**Transaction ID:** 880AF60103AF706AFBE  
 Amount of Each Receipt this Period 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 250.00  
 Earmarked for Carly for California Inc

**C.** Full Name (Last, First, Middle Initial)  
David Quinlan  
 Mailing Address N4404 Lakeshore Dr  
 City Kewaunee State WI Zip Code 54216-9726  
 Date of Receipt 07 / 13 / 2010  
**Transaction ID:** F1E3D2F0AB27AD87314  
 Amount of Each Receipt this Period 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 250.00  
 Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 210.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 131 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
David Quinlan

Mailing Address N4404 Lakeshore Dr

City State Zip Code  
Kewaunee WI 54216-9726

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2010

Transaction ID: EA9C57F4399C6191A8B

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
William Radovich

Mailing Address 18942 E Telephone Rd

City State Zip Code  
Monroe Center IL 61052-9746

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

Name of Employer Occupation  
OSF Aviation LLC Helicopter Pilot

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 10.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2010

Transaction ID: 585AD55D6887A6E3777

Amount of Each Receipt this Period  
10.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Barbara M. Ramsey

Mailing Address 2120 Highland Ave

City State Zip Code  
Shreveport LA 71104-2332

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

Name of Employer Occupation  
Information requested Information requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 10.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 19 / 2010

Transaction ID: 0B3D233E0C12FDA03FE

Amount of Each Receipt this Period  
10.00

Earmarked for Bachmann for Congress

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

70.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 132 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SUSAN B ANTHONY LIST INC. CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Travis Edward Rankin

Mailing Address **425 Alcatraz Ave  
Apt 1**

City **Oakland** State **CA** Zip Code **94609-1152**

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

Name of Employer **ABM Security Services** Occupation **Security Guard**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.00**

Date of Receipt **07 / 06 / 2010**

**Transaction ID: 7623B05D403115F635A**

Amount of Each Receipt this Period **200.00**

Earmarked for Carly for California Inc

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

Mailing Address **2933 Mirrormere Cir**

City **Bryan** State **TX** Zip Code **77807-4824**

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

Name of Employer **Texas A&M University** Occupation **Physician**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.00**

Date of Receipt **07 / 05 / 2010**

**Transaction ID: 2584F09750D703CB98B**

Amount of Each Receipt this Period **50.00**

Earmarked for Bachmann for Congress

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

Mailing Address **2933 Mirrormere Cir**

City **Bryan** State **TX** Zip Code **77807-4824**

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

Name of Employer **Texas A&M University** Occupation **Physician**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.00**

Date of Receipt **07 / 05 / 2010**

**Transaction ID: 05453AE6A33A3DFAEAE**

Amount of Each Receipt this Period **50.00**

Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► **300.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 133 / 344

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SUSAN B ANTHONY LIST INC. CANDIDATE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
Ann Reed

Mailing Address 2933 Mirrormere Cir

City State Zip Code  
Bryan TX 77807-4824

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Texas A&M University Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 07 / 05 / 2010

**Transaction ID:** 85A803B8F2232108C9D

Amount of Each Receipt this Period 50.00

Earmarked for Carly for California Inc

**B.**

Full Name (Last, First, Middle Initial)  
Vernon Reeh

Mailing Address 128 Shadow Knls

City State Zip Code  
Boerne TX 78006-8630

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self Insurance Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 08 / 2010

**Transaction ID:** A57C7E1B8EE8C4C2753

Amount of Each Receipt this Period 50.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Gretchen K. Reese

Mailing Address 6 Hickory Grove Pt

City State Zip Code  
Savannah GA 31405-1033

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 60.00

Date of Receipt 07 / 14 / 2010

**Transaction ID:** CB569C2D5EF121E8658

Amount of Each Receipt this Period 35.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... 135.00

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

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

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

FOR LINE NUMBER: PAGE 134 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Lynne Rekowski  
Mailing Address 27562 Concord Ave  
City Warren State MI Zip Code 48093-2874  
FEC ID number of contributing federal political committee. **C**  
Name of Employer General Dynamics Occupation Contracts Administrator  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 175.00  
Date of Receipt 07 / 13 / 2010  
Transaction ID: 292C7228953577EEB56  
Amount of Each Receipt this Period 50.00  
**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.** Full Name (Last, First, Middle Initial)  
Lynne Rekowski  
Mailing Address 27562 Concord Ave  
City Warren State MI Zip Code 48093-2874  
FEC ID number of contributing federal political committee. **C**  
Name of Employer General Dynamics Occupation Contracts Administrator  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 175.00  
Date of Receipt 07 / 13 / 2010  
Transaction ID: 073B8A6DB4F66067C0D  
Amount of Each Receipt this Period 100.00  
**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**C.** Full Name (Last, First, Middle Initial)  
Cristine M. Rembold  
Mailing Address 25 Royal View Dr  
City Rochester State NY Zip Code 14625-1141  
FEC ID number of contributing federal political committee. **C**  
Name of Employer info requested Occupation info requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00  
Date of Receipt 07 / 13 / 2010  
Transaction ID: 1FEF5991331F343706B  
Amount of Each Receipt this Period 50.00  
**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 135 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Cristine M. Rembold

Mailing Address 25 Royal View Dr

City State Zip Code  
Rochester NY 14625-1141

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2010

Transaction ID: 2CFF836D81153B9F41E

Amount of Each Receipt this Period

50.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.**

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

Mailing Address 4200 Glenarm Road

City State Zip Code  
Crestwood KY 40014-8976

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 80.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 02 / 2010

Transaction ID: C9B20FDB0AFCA22E806

Amount of Each Receipt this Period

40.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**C.**

Full Name (Last, First, Middle Initial)  
Robert Riccomini

Mailing Address 1205 126th Rd

City State Zip Code  
Emmett KS 66422-9639

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 120.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2010

Transaction ID: AF2E55F4819EAF3F905

Amount of Each Receipt this Period

25.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

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

0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 / 344
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert Riccomini		Date of Receipt MM / DD / YYYY 07 / 13 / 2010
	Mailing Address 1205 126th Rd		<b>Transaction ID:</b> 9EDD5796F3CADAC6F28
	City Emmett	State KS	Zip Code 66422-9639
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
	Name of Employer info requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation info requested Aggregate Year-to-Date ▼ 120.00	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc

<b>B.</b>	Full Name (Last, First, Middle Initial) Donna Riggins		Date of Receipt MM / DD / YYYY 07 / 13 / 2010
	Mailing Address 2273 Lankford Rd		<b>Transaction ID:</b> C2619334407EF1D8A90
	City Bowersville	State GA	Zip Code 30516-2060
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
	Name of Employer Riggins Pharmacy, LLP (Partner) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Pharmacist Aggregate Year-to-Date ▼ 260.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Joseph Roach		Date of Receipt MM / DD / YYYY 07 / 06 / 2010
	Mailing Address 9466 Navajo Trl		<b>Transaction ID:</b> 38573FE805E269FB4F6
	City Morongo Valley	State CA	Zip Code 92256-9547
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
	Name of Employer St. Michael's of Morongo Valley Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Reverend Aggregate Year-to-Date ▼ 200.00	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

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

FOR LINE NUMBER: PAGE 137 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Joseph Roach

Mailing Address 9466 Navajo Trl

City State Zip Code  
Morongo Valley CA 92256-9547

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

Name of Employer Occupation  
St. Michael's of Morongo Valley Reverend

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 200.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 06 / 2010

Transaction ID: AD545A8A91623476E31

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)

Jeanne Robertson

Mailing Address 38 Sawmill Grove Ln

City State Zip Code  
The Woodlands TX 77380-2171

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

Name of Employer Occupation  
retired homemakers

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 50.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 09 / 2010

Transaction ID: 5BA81716A7127EC11FF

Amount of Each Receipt this Period  
50.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)

Suzanne Roehm

Mailing Address 328 Harvest Dr

City State Zip Code  
Lititz PA 17543-9277

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

Name of Employer Occupation  
self infant massage instructor

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 15.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 09 / 2010

Transaction ID: 1040FA0CB10C1BE7B94

Amount of Each Receipt this Period  
15.00

Earmarked for Bachmann for Congress

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

65.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 138 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Louis Rose</p> <p>Mailing Address 620 Caughran PI NE</p> <p>City State Zip Code Albuquerque NM 87123-1340</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation WBT Administrator</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 100.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 09 / 2010</p> <p><b>Transaction ID:</b> E651CDE18AC5BD853D6</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Earmarked for Bachmann for Congress</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) David Rowe</p> <p>Mailing Address 104 Bergen St</p> <p>City State Zip Code Lawrenceville NJ 08648-1469</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Hope Presbyterian Church Pastor</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 35.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 08 / 2010</p> <p><b>Transaction ID:</b> 397C867B6230CEA6F02</p> <p>Amount of Each Receipt this Period 35.00</p> <p>Earmarked for Bachmann for Congress</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bernadette Rowen</p> <p>Mailing Address 9039 SE 7th Avenue Rd</p> <p>City State Zip Code Ocala FL 34480-9367</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Retired Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 15.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 08 / 2010</p> <p><b>Transaction ID:</b> 5606AC04C81AA880323</p> <p>Amount of Each Receipt this Period 15.00</p> <p>Earmarked for Bachmann for Congress</p>

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 139 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Delores M. Ryan		Date of Receipt MM / DD / YYYY 07 / 21 / 2010
	Mailing Address 1675 Grosvenor Cir		<b>Transaction ID:</b> 22FEDC08FCBB1EA43B1
	City Wheaton	State IL	Zip Code 60189-6192
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer community adult day care		Occupation activities assistant	Earmarked for Kinzinger for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Jose Salazar		Date of Receipt MM / DD / YYYY 07 / 13 / 2010
	Mailing Address 19620 Cutler Ct		<b>Transaction ID:</b> 4B20D1316783DC30288
	City Cutler Bay	State FL	Zip Code 33189-2058
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 35.00
Name of Employer information requested		Occupation information requested	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 70.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Jose Salazar		Date of Receipt MM / DD / YYYY 07 / 13 / 2010
	Mailing Address 19620 Cutler Ct		<b>Transaction ID:</b> B625F9572F51BF520F7
	City Cutler Bay	State FL	Zip Code 33189-2058
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 35.00
Name of Employer information requested		Occupation information requested	<b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 70.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	50.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 140 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Christine M. Sasan

Mailing Address 162 Meernaa Ave

City State Zip Code  
Fairfax CA 94930-2010

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

Name of Employer information requested Occupation information requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 75.00

Date of Receipt: 07 / 13 / 2010  
Transaction ID: 3D9C8B68BC850ED6DBA  
Amount of Each Receipt this Period: 75.00  
Earmarked for Carly for California Inc

**B.** Full Name (Last, First, Middle Initial)  
Roxanne Savaryn-Wicks

Mailing Address 1826 22nd Avenue

City State Zip Code  
Brookings SD 57006-4232

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 60.00

Date of Receipt: 07 / 02 / 2010  
Transaction ID: 95C7C0B4F8BFDCBC088  
Amount of Each Receipt this Period: 20.00  
Earmarked for Carly for California Inc

**C.** Full Name (Last, First, Middle Initial)  
Roxanne Savaryn-Wicks

Mailing Address 1826 22nd Avenue

City State Zip Code  
Brookings SD 57006-4232

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 60.00

Date of Receipt: 07 / 02 / 2010  
Transaction ID: D6D41B38CBB09982CAE  
Amount of Each Receipt this Period: 20.00  
Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 115.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 141 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Eugene Scarberry

Mailing Address 152 Terrace Ct

City State Zip Code  
Trafford PA 15085-2808

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

Name of Employer Phillips Resperonics Occupation Inventor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2010

**Transaction ID:** 464B6A25633AAE8C0BC

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**B.**

Full Name (Last, First, Middle Initial)  
Eugene Scarberry

Mailing Address 152 Terrace Ct

City State Zip Code  
Trafford PA 15085-2808

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

Name of Employer Phillips Resperonics Occupation Inventor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2010

**Transaction ID:** 317C1A92F735F5CC00F

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Kelly Schack

Mailing Address 2208 Silver Ln  
Apt 107

City State Zip Code  
New Brighton MN 55112-7438

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

Name of Employer Aegis Therapies Occupation Physical Therapist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
165.00

Date of Receipt  
MM / DD / YYYY  
07 / 11 / 2010

**Transaction ID:** D53A64FE388424BCF1B

Amount of Each Receipt this Period  
100.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **100.00**

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

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

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

FOR LINE NUMBER: PAGE 142 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Kathryn Scharplaz  
Mailing Address 658 Justice Rd  
City Minneapolis State KS Zip Code 67467-8720  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Prairie Natural Beef Occupation: Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 150.00  
Date of Receipt: 07 / 09 / 2010  
Transaction ID: B682CDBDDEE016ADAB92  
Amount of Each Receipt this Period: 100.00  
Earmarked for Bachmann for Congress

**B.** Full Name (Last, First, Middle Initial)  
Ruthie Scheidel  
Mailing Address 563 Woodside Ave  
City Berwyn State PA Zip Code 19312-1617  
FEC ID number of contributing federal political committee. **C**  
Name of Employer info requested Occupation info requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 25.00  
Date of Receipt: 07 / 13 / 2010  
Transaction ID: FCB1C7A153D4C35284D  
Amount of Each Receipt this Period: 25.00  
[MEMO ITEM] Earmarked for Friends of Sharron Angle

**C.** Full Name (Last, First, Middle Initial)  
Marilyn Schepansky  
Mailing Address 30555 Old Stream St  
City Southfield State MI Zip Code 48076-5304  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Educational Center for Life Occupation: Administrative Assistant  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 75.00  
Date of Receipt: 07 / 08 / 2010  
Transaction ID: BFCAC0496A259BBC810  
Amount of Each Receipt this Period: 25.00  
Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 125.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 143 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 3105 S Ambrose Ln

City State Zip Code  
Sault Sainte Marie MI 49783-8825

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4.00

Date of Receipt: 07 / 13 / 2010  
**Transaction ID:** 3AC2876B564BB90BBF9

Amount of Each Receipt this Period: 4.00

Earmarked for Carly for California Inc

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

Mailing Address 4207 Montview Blvd

City State Zip Code  
Denver CO 80207-3725

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

Name of Employer Bank Occupation Banking

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 07 / 21 / 2010  
**Transaction ID:** 061AE472A23F94E449B

Amount of Each Receipt this Period: 500.00

Earmarked for Carly for California Inc

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

Mailing Address 4207 Montview Blvd

City State Zip Code  
Denver CO 80207-3725

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

Name of Employer Bank Occupation Banking

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 07 / 21 / 2010  
**Transaction ID:** 990AB5C880739915F4A

Amount of Each Receipt this Period: 500.00

Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1004.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 144 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Frederick Schneider

Mailing Address 632 Skyline Dr

City State Zip Code  
Cody WY 82414-5012

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt: 07 / 26 / 2010

**Transaction ID:** 49B52356A145312B918

Amount of Each Receipt this Period: 50.00

Earmarked for Carly for California Inc

**B.**

Full Name (Last, First, Middle Initial)  
Frederick Schneider

Mailing Address 632 Skyline Dr

City State Zip Code  
Cody WY 82414-5012

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt: 07 / 26 / 2010

**Transaction ID:** 56050AF7DD6B2C9BFE2

Amount of Each Receipt this Period: 50.00

Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Ann E. Schutt

Mailing Address 3021 Chapel View Dr

City State Zip Code  
Beltsville MD 20705-3429

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

Name of Employer Montgomery County Public Schools Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 07 / 06 / 2010

**Transaction ID:** 0108D9800C2EB3CCDDF

Amount of Each Receipt this Period: 200.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ► 100.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 145 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Ann E. Schutt

Mailing Address 3021 Chapel View Dr

City State Zip Code  
Beltsville MD 20705-3429

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

Name of Employer Occupation  
Montgomery County Public Schools Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2010

**Transaction ID:** 5C08287027D18A70328

Amount of Each Receipt this Period  
400.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)  
Herbert Seigler

Mailing Address 125 Quiet Cove Dr

City State Zip Code  
Chapin SC 29036-7609

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

Name of Employer Occupation  
Richardson Oilseed, Ltd. Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 135.00

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2010

**Transaction ID:** 483A9F9A71C74C8A2DF

Amount of Each Receipt this Period  
35.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Edward Sekerak

Mailing Address 331 Weatherford Dr NW

City State Zip Code  
Madison AL 35757-7564

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

Name of Employer Occupation  
Gray Resea Systems Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2010

**Transaction ID:** AD644776EFEB7056B39

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **335.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 146 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert Shaw Mailing Address 5862 Roy Hts City State Zip Code Colorado Springs CO 80918-1593 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Tipton Honda Sales Manager Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00	Date of Receipt M M / D D / Y Y Y Y 07 / 06 / 2010 <b>Transaction ID:</b> D77D88EE758AD9E4721 Amount of Each Receipt this Period 25.00 Earmarked for Friends of Sharron Angle
<b>B.</b>	Full Name (Last, First, Middle Initial) Robert Shaw Mailing Address 5862 Roy Hts City State Zip Code Colorado Springs CO 80918-1593 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Tipton Honda Sales Manager Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00	Date of Receipt M M / D D / Y Y Y Y 07 / 06 / 2010 <b>Transaction ID:</b> B581AC76DA8AC9745EB Amount of Each Receipt this Period 25.00 Earmarked for Carly for California Inc
<b>C.</b>	Full Name (Last, First, Middle Initial) Kay Sheldon Mailing Address 144 Dudala Way City State Zip Code Loudon TN 37774-6806 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation retired teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2010 <b>Transaction ID:</b> D5F00E80969A7B33D6F Amount of Each Receipt this Period 1000.00 <b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	50.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 147 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Ellen Sheridan

Mailing Address 3 Saturn Blvd

City Hauppauge State NY Zip Code 11788-2631

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

Name of Employer Info requested Occupation Info requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt 07 / 22 / 2010

**Transaction ID:** 5DF919CD5EBA14910AB

Amount of Each Receipt this Period 25.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Margaret Siebert

Mailing Address 929 Longwood Dr

City Lake Forest State IL Zip Code 60045-4056

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

Name of Employer Self employed Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt 07 / 08 / 2010

**Transaction ID:** 146B225379EDD6B2595

Amount of Each Receipt this Period 50.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Deb Sievers

Mailing Address 19811 Valley Mill Rd

City Freeland State MD Zip Code 21053-9528

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

Name of Employer none Occupation homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt 07 / 09 / 2010

**Transaction ID:** 30455D99DBAEE563610

Amount of Each Receipt this Period 25.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 100.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 148 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Racquel Skold Mailing Address 1 Thebeau Ln City State Zip Code Freeport ME 04032-6648 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Tufts Occupation Student Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00	Date of Receipt M M / D D / Y Y Y Y 07 / 08 / 2010 Transaction ID: E513369856A183E3159 Amount of Each Receipt this Period 15.00 Earmarked for Bachmann for Congress
<b>B.</b>	Full Name (Last, First, Middle Initial) Baker Smith Mailing Address 3360 E Terrell Branch Ct SE City State Zip Code Marietta GA 30067-5164 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Morris-Anderson & Ass. Occupation Mngt. Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M / D D / Y Y Y Y 07 / 08 / 2010 Transaction ID: E8F69E8A76A710CD550 Amount of Each Receipt this Period 100.00 Earmarked for Carly for California Inc
<b>C.</b>	Full Name (Last, First, Middle Initial) Baker Smith Mailing Address 3360 E Terrell Branch Ct SE City State Zip Code Marietta GA 30067-5164 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Morris-Anderson & Ass. Occupation Mngt. Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M / D D / Y Y Y Y 07 / 08 / 2010 Transaction ID: F66D42CE42656CD01D4 Amount of Each Receipt this Period 100.00 Earmarked for Friends of Sharron Angle
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		<b>215.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 149 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial) Baker Smith		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
Mailing Address 3360 E Terrell Branch Ct SE		<b>Transaction ID:</b> 27CBE5D661B6CE120D7
City Marietta	State GA	Zip Code 30067-5164
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Morris-Anderson & Ass.	Occupation Mngt. Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

**B.**

Full Name (Last, First, Middle Initial) Barbara Smith		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
Mailing Address 1075 Lamonte Ln		<b>Transaction ID:</b> E2F3B8CEFBF25915483
City Houston	State TX	Zip Code 77018-4318
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer self	Occupation writer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial) Deborah Smith		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
Mailing Address 4505 Cordova Rd		<b>Transaction ID:</b> E8A757CAAFBAD9D7688
City Louisville	State KY	Zip Code 40207-3423
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20.00	Earmarked for Bachmann for Congress

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	170.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 150 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Gregory Smith

Mailing Address 21 Harbour Heights Dr

City State Zip Code  
Annapolis MD 21401-2109

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

Name of Employer Occupation  
Graphics Systems Sales Consultant

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 60.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2010

Transaction ID: 5DF6FA5B55B484B2CD9

Amount of Each Receipt this Period  
35.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Rosemarie Smith

Mailing Address 363 Norris Rd

City State Zip Code  
Airville PA 17302-9141

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

Name of Employer Occupation  
None Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2010

Transaction ID: 1A74B6253796941D5B8

Amount of Each Receipt this Period  
100.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Peter G. Snow

Mailing Address PO Box 514

City State Zip Code  
Emigrant MT 59027-0514

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

Name of Employer Occupation  
information requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 20.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2010

Transaction ID: 5A0D466FDACB5EA2289

Amount of Each Receipt this Period  
10.00

Earmarked for Friends of Sharron Angle

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

145.00

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

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

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

FOR LINE NUMBER: PAGE 151 / 344  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Peter G. Snow

Mailing Address PO Box 514

City State Zip Code  
Emigrant MT 59027-0514

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

Name of Employer Occupation information requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 20.00

Date of Receipt: 07 / 13 / 2010  
**Transaction ID:** 9DCEE72AF6F40C5D00D  
Amount of Each Receipt this Period: 10.00

Earmarked for Carly for California Inc

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

Mailing Address 5106 Highway 119

City State Zip Code  
Montevallo AL 35115-5906

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 20.00

Date of Receipt: 07 / 13 / 2010  
**Transaction ID:** 8E4530FFFB33FE057B4  
Amount of Each Receipt this Period: 10.00

Earmarked for Carly for California Inc

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

Mailing Address 5106 Highway 119

City State Zip Code  
Montevallo AL 35115-5906

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 20.00

Date of Receipt: 07 / 13 / 2010  
**Transaction ID:** 418CC3AA74F2D7957BC  
Amount of Each Receipt this Period: 10.00

Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 30.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 152 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Christopher Sollog

Mailing Address 433 N Gannon Ave

City Staten Island State NY Zip Code 10314-4362

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

Name of Employer ISO Occupation Proofreader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt 07 / 03 / 2010

Transaction ID: 6A4CFBB987CE16BE0E5

Amount of Each Receipt this Period 25.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Robert G. Solomon

Mailing Address 519 68th Pl

City Seat Pleasant State MD Zip Code 20743-2137

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

Name of Employer None Occupation None

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15.00

Date of Receipt 07 / 03 / 2010

Transaction ID: E2ABAFB42301B9929A0

Amount of Each Receipt this Period 5.00

Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Robert G. Solomon

Mailing Address 519 68th Pl

City Seat Pleasant State MD Zip Code 20743-2137

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

Name of Employer None Occupation None

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15.00

Date of Receipt 07 / 08 / 2010

Transaction ID: 2E94BC112D72A8C70C4

Amount of Each Receipt this Period 10.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **40.00**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 153 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Marian Sprague

Mailing Address PO Box 31861

City State Zip Code  
Mesa AZ 85275-1861

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

Name of Employer Occupation  
magnus title escrow

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2010

**Transaction ID:** ECF2C233D26725B7651

Amount of Each Receipt this Period  
25.00

**B.**

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

Mailing Address 27661 Blossom Hill Rd

City State Zip Code  
Laguna Niguel CA 92677-6012

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

Name of Employer Occupation  
Retired Mortgage Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 35.00

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2010

**Transaction ID:** 2D93CAEC00D4BFAE686

Amount of Each Receipt this Period  
35.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Kim Stewart

Mailing Address 401 Wisconsin Ave

City State Zip Code  
Geddes SD 57342-2119

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

Name of Employer Occupation  
Self Antiques Resale

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 35.00

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2010

**Transaction ID:** 8F817A8AB82E291E36F

Amount of Each Receipt this Period  
20.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► **80.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 154 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial) Edward Stiker		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 50 Central Park W 4C		<b>Transaction ID:</b> 6E0F4E91BB7F88923E0
City New York	State Zip Code NY 10023-6006	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Loreal of the United States	Occupation Product Marketing	Aggregate Year-to-Date 5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) Edward Stiker		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 50 Central Park W 4C		<b>Transaction ID:</b> DE5547156630413D241
City New York	State Zip Code NY 10023-6006	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 4800.00
Name of Employer Loreal of the United States	Occupation Product Marketing	Aggregate Year-to-Date 5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial) Edward Stiker		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 50 Central Park W 4C		<b>Transaction ID:</b> 5ADC37192C99FF6FF12
City New York	State Zip Code NY 10023-6006	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 4800.00
Name of Employer Loreal of the United States	Occupation Product Marketing	Aggregate Year-to-Date 5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 155 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
John Stocks

Mailing Address 1510 Bridgewater Way S

City Mansfield State OH Zip Code 44906-3577

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

Name of Employer Retired Occupation Caretaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt 07 / 08 / 2010

**Transaction ID:** 98B66F9497F8E52A012

Amount of Each Receipt this Period 50.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Joseph Storch

Mailing Address 44 Mountain Rest Rd

City New Paltz State NY Zip Code 12561-2917

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** A442956675944BBC1A9

Amount of Each Receipt this Period 200.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Joseph Storch

Mailing Address 44 Mountain Rest Rd

City New Paltz State NY Zip Code 12561-2917

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** 527018BE0FF695E93C3

Amount of Each Receipt this Period 200.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 50.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 156 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Thomas F. P. Sullivan

Mailing Address 905 Ponte Vedra Blvd

City State Zip Code  
Ponte Vedra Beach FL 32082-3524

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

Name of Employer Government Institutes Inc Occupation Preside

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 12 / 2010

**Transaction ID:** F7755EA41DAEB2327EE

Amount of Each Receipt this Period  
500.00

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

Mailing Address 972 Patrick Cir

City State Zip Code  
Folsom CA 95630-7503

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

Name of Employer Homemaker Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 70.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 03 / 2010

**Transaction ID:** 7B87DA25AAC8EFB2B57

Amount of Each Receipt this Period  
35.00

Earmarked for Carly for California Inc

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

Mailing Address 16541 Heron Coach Way Apt 507

City State Zip Code  
Fort Myers FL 33908-5519

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

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 12 / 2010

**Transaction ID:** CA558846F93CCE836CB

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1535.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 157 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Spencer J. Swope

Mailing Address 157 County Road 620

City Hanceville State AL Zip Code 35077-6843

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

Name of Employer EWTN Occupation Regional Marketing Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 09 / 2010

**Transaction ID:** 3FCE9F252A811AD52B8

Amount of Each Receipt this Period 50.00

Earmarked for Bachmann for Congress

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

Mailing Address 795 Stephanie Cir

City Great Falls State VA Zip Code 22066-2839

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 26 / 2010

**Transaction ID:** EBD4274D2B117CC2C37

Amount of Each Receipt this Period 50.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

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

Mailing Address 795 Stephanie Cir

City Great Falls State VA Zip Code 22066-2839

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 26 / 2010

**Transaction ID:** 98FF8EDD328103F4501

Amount of Each Receipt this Period 50.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 50.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 158 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Thomas P. Ternus

Mailing Address 1311 Antoine Dr  
Apt 149

City State Zip Code  
Houston TX 77055-6975

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

Name of Employer Self Occupation Auditor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 120.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2010

Transaction ID: 1D5EEFF6E48157EB94

Amount of Each Receipt this Period

50.00

Earmarked for Bachmann for Congress

**B.**

Full Name (Last, First, Middle Initial)  
Andrew Terzella

Mailing Address 50 Pine St  
Apt 5I

City State Zip Code  
Montclair NJ 07042-4707

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 30.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 26 / 2010

Transaction ID: DC71B51B1F11A83E381

Amount of Each Receipt this Period

10.00

[MEMO ITEM]  
Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Andrew Terzella

Mailing Address 50 Pine St  
Apt 5I

City State Zip Code  
Montclair NJ 07042-4707

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 30.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 26 / 2010

Transaction ID: 8DF5B9592B59544D154

Amount of Each Receipt this Period

10.00

[MEMO ITEM]  
Earmarked for Carly for California Inc

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

50.00

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

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

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

FOR LINE NUMBER: PAGE 159 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 2567 NW Rimrock Rd # 3

City Redmond State OR Zip Code 97756-8568

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** ABBCC41AB6991D66CBB

Amount of Each Receipt this Period 250.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

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

Mailing Address 2567 NW Rimrock Rd # 3

City Redmond State OR Zip Code 97756-8568

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 13 / 2010

**Transaction ID:** 0417CAE2CC69EDB8665

Amount of Each Receipt this Period 250.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

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

Mailing Address 333 Lee Dr Apt 371

City Baton Rouge State LA Zip Code 70808-0931

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

Name of Employer Retired Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 03 / 2010

**Transaction ID:** DCD06C2D73AD3DD1E9F

Amount of Each Receipt this Period 50.00

Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 50.00

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

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

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

FOR LINE NUMBER: PAGE 160 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

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

Mailing Address 10450 Rocking H Rd

City State Zip Code  
Salado TX 76571-5117

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt: 07 / 13 / 2010  
Transaction ID: DC6C297476C4F9BBC83  
Amount of Each Receipt this Period: 25.00  
Earmarked for Bachmann for Congress

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

Mailing Address 2985 Catlett Rd

City State Zip Code  
Pleasant Grove CA 95668-9741

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

Name of Employer self Occupation farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 07 / 08 / 2010  
Transaction ID: 4CDE88734950E6E8E00  
Amount of Each Receipt this Period: 250.00  
Earmarked for Bachmann for Congress

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

Mailing Address 1010 Lancaster Dr

City State Zip Code  
Orlando FL 32806-2315

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

Name of Employer Retired Occupation Sales Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt: 07 / 08 / 2010  
Transaction ID: B79F86807A5AD2F8F14  
Amount of Each Receipt this Period: 50.00  
Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 325.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 / 344
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary Tummillo		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
	Mailing Address 924 Windsor Ave		<b>Transaction ID:</b> D97B10BD0038C88A3C1
	City Windsor	State CT	Zip Code 06095-3422
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 35.00
	Name of Employer Retired	Occupation Retired	Earmarked for Bachmann for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 70.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Carolyn Vail		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
	Mailing Address 587 Greenview Dr		<b>Transaction ID:</b> 2A03B0A63DF97B2E230
	City Denver	State PA	Zip Code 17517-8500
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
	Name of Employer	Occupation Retired	Earmarked for Bachmann for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 40.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Lisa Vasko		Date of Receipt MM / DD / YYYY 07 / 02 / 2010
	Mailing Address 510 Ellen St		<b>Transaction ID:</b> D3DFA9F2A3774EE41D8
	City Hellertown	State PA	Zip Code 18055-2219
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
	Name of Employer info requested	Occupation info requested	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	55.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 162 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Lisa Vasko

Mailing Address 510 Ellen St

City State Zip Code  
Hellertown PA 18055-2219

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

Name of Employer info requested Occupation info requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 60.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 02 / 2010

Transaction ID: C141733309BD96FDC0

Amount of Each Receipt this Period

30.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.**

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

Mailing Address 3324 Yale Ave NW

City State Zip Code  
Canton OH 44709-3054

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

Name of Employer Tri-Cast Ltd Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 25.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2010

Transaction ID: 851C2AFD037D2AF78EA

Amount of Each Receipt this Period

25.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Billy Volner

Mailing Address 3615 Pennsylvania Ave

City State Zip Code  
Mims FL 32754-5114

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 35.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 09 / 2010

Transaction ID: A1E703CFCA9C94B1309

Amount of Each Receipt this Period

35.00

Earmarked for Bachmann for Congress

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

60.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 163 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial) Susan M. Vontersch		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
Mailing Address 150 Rendant Ave		<b>Transaction ID:</b> 97C1A69779A31CD6700
City Savannah	State Zip Code GA 31419-2228	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer	Occupation Homeschool Mother	Earmarked for Bachmann for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 70.00	

**B.**

Full Name (Last, First, Middle Initial) Larry Walsh		Date of Receipt MM / DD / YYYY 07 / 13 / 2010
Mailing Address 2321 Saint Anthonys PI		<b>Transaction ID:</b> F8D3B1A6A6534F51322
City Sioux City	State Zip Code IA 51108-3602	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer info requested	Occupation info requested	<b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

**C.**

Full Name (Last, First, Middle Initial) Judith Warren		Date of Receipt MM / DD / YYYY 07 / 02 / 2010
Mailing Address 8 Santa Fe Place		<b>Transaction ID:</b> CB25C6E3378C45C9D36
City Safford	State Zip Code AZ 85546-3737	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Mt. Graham Community Hospital	Occupation Registered Nurse	<b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	35.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 164 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
Judith Warren

Mailing Address 8 Santa Fe Place

City State Zip Code  
Safford AZ 85546-3737

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

Name of Employer Occupation  
Mt. Graham Community Hospital Registered Nurse

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
MM / DD / YYYY  
07 / 02 / 2010

**Transaction ID:** 45F84BC8AEAC63C1E9D

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
Earmarked for Carly for California Inc

**B.**

Full Name (Last, First, Middle Initial)  
Richard T. Welborn

Mailing Address 534 N Imboden St Apt 102

City State Zip Code  
Alexandria VA 22304-5487

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

Name of Employer Occupation  
Lockheed Martin - Belcan Administrative Assistant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2010

**Transaction ID:** A328B525DDD90660F2F

Amount of Each Receipt this Period  
15.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**C.**

Full Name (Last, First, Middle Initial)  
Muriel Welch, Sbg

Mailing Address 6331 Forest Vlg

City State Zip Code  
San Antonio TX 78250-4070

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 40.00

Date of Receipt  
MM / DD / YYYY  
07 / 26 / 2010

**Transaction ID:** 81D1DD95166D774B0FE

Amount of Each Receipt this Period  
20.00

Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ► **20.00**

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

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

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

FOR LINE NUMBER: PAGE 165 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Muriel Welch, Sbg  
Mailing Address 6331 Forest Vlg  
City San Antonio State TX Zip Code 78250-4070  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 40.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 44CD294E792D7411A7D  
Amount of Each Receipt this Period 20.00  
Earmarked for Friends of Sharron Angle

**B.** Full Name (Last, First, Middle Initial)  
Regina G. Wells  
Mailing Address 4156 NW 23rd St  
City Oklahoma City State OK Zip Code 73107-2646  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Oklahoma Roofing and Sheet Metal, LLC Occupation Office Administration  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 20.00  
Date of Receipt 07 / 08 / 2010  
Transaction ID: CF81704AFC1F78FE9EE  
Amount of Each Receipt this Period 20.00  
Earmarked for Bachmann for Congress

**C.** Full Name (Last, First, Middle Initial)  
John Whitlock  
Mailing Address 8720 River Rd  
City Richmond State VA Zip Code 23229-8307  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The Whitlock Group Occupation President and CEO  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 07 / 21 / 2010  
Transaction ID: 531E47451F2D60D1E5F  
Amount of Each Receipt this Period 500.00  
[MEMO ITEM]  
Earmarked for Carly for California Inc

**SUBTOTAL** of Receipts This Page (optional) ..... ► 40.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 166 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)  
John Whitlock

Mailing Address 8720 River Rd

City Richmond State VA Zip Code 23229-8307

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

Name of Employer The Whitlock Group Occupation President and CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 21 / 2010

Transaction ID: F4DAB34A62904E733C8

Amount of Each Receipt this Period 500.00

**[MEMO ITEM]**  
Earmarked for Friends of Sharron Angle

**B.**

Full Name (Last, First, Middle Initial)  
Melissa Wilson

Mailing Address 1614 Lily Lake Dr

City Colorado Springs State CO Zip Code 80921-4111

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

Name of Employer None Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 35.00

Date of Receipt 07 / 08 / 2010

Transaction ID: A67DB50031AE3D93EA8

Amount of Each Receipt this Period 35.00

Earmarked for Bachmann for Congress

**C.**

Full Name (Last, First, Middle Initial)  
Alex Woehr

Mailing Address 106 Hallcox St

City Greenville State SC Zip Code 29609-3216

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

Name of Employer The Worthwhile Company Occupation Website developer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 70.00

Date of Receipt 07 / 03 / 2010

Transaction ID: 4CDCF0154A4FA2064CC

Amount of Each Receipt this Period 35.00

Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 70.00

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

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

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

FOR LINE NUMBER: PAGE 167 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Alex Woehr  
Mailing Address 106 Hallcox St  
City Greenville State SC Zip Code 29609-3216  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The Worthwhile Company Occupation Website developer  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 70.00  
Date of Receipt 07 / 03 / 2010  
Transaction ID: EE64C910B200F3F00D5  
Amount of Each Receipt this Period 35.00  
Earmarked for Carly for California Inc

**B.** Full Name (Last, First, Middle Initial)  
Mary Wolf  
Mailing Address 178 Backbone Rd  
City Sewickley State PA Zip Code 15143-9320  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00  
Date of Receipt 07 / 06 / 2010  
Transaction ID: 3C852FD87AA52E9874B  
Amount of Each Receipt this Period 75.00

**C.** Full Name (Last, First, Middle Initial)  
Mary Wolosek  
Mailing Address 5621 Patrick Henry Ct  
City Wisc Rapids State WI Zip Code 54494-3489  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Wolosek & Wolosek CPAS Occupation CPA  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 85.00  
Date of Receipt 07 / 09 / 2010  
Transaction ID: F25A04AEF7FC97C1FE1  
Amount of Each Receipt this Period 50.00  
Earmarked for Bachmann for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 160.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 168 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ruth E. Wood  
Mailing Address 1743 N Church Ave  
City Reedley State CA Zip Code 93654-2037  
FEC ID number of contributing federal political committee. **C**  
Name of Employer info. requested Occupation info. requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 75.00  
Date of Receipt 07 / 13 / 2010  
Transaction ID: 0B6DE5C6BED74CE68EC  
Amount of Each Receipt this Period 75.00  
Earmarked for Carly for California Inc

**B.** Full Name (Last, First, Middle Initial)  
Beverly C. Wright  
Mailing Address 6004 Oakmont Drive  
City Wichita Falls State TX Zip Code 76310-2834  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 150.00  
Date of Receipt 07 / 02 / 2010  
Transaction ID: D392CA2CAA378C1D0EA  
Amount of Each Receipt this Period 50.00  
Earmarked for Carly for California Inc

**C.** Full Name (Last, First, Middle Initial)  
Beverly C. Wright  
Mailing Address 6004 Oakmont Drive  
City Wichita Falls State TX Zip Code 76310-2834  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 150.00  
Date of Receipt 07 / 02 / 2010  
Transaction ID: 09BD14AD166915B0902  
Amount of Each Receipt this Period 50.00  
Earmarked for Friends of Sharron Angle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 175.00  
**TOTAL** This Period (last page this line number only) ..... ►



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 169 / 344  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial) George Yoder		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 15702 Blackburn St		<b>Transaction ID:</b> 7B6AEEA40A51537E972
City Accokeek	State MD	Zip Code 20607-9512
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

**B.**

Full Name (Last, First, Middle Initial) George Yoder		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 15702 Blackburn St		<b>Transaction ID:</b> 35DEC924DFD83878885
City Accokeek	State MD	Zip Code 20607-9512
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

**C.**

Full Name (Last, First, Middle Initial) Robin York		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
Mailing Address 791 Winding Grove Ln		<b>Transaction ID:</b> 9A4B57AA36A54765A91
City Loganville	State GA	Zip Code 30052-7014
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Self	Occupation Attorney	Earmarked for Bachmann for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	15.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 170 / 344  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) June Zeigler		Date of Receipt MM / DD / YYYY 07 / 03 / 2010		
	Mailing Address 2261 Warren Dr		<b>Transaction ID:</b> 0112BECAEBF99A54719		
	City Morristown	State TN	Zip Code 37814-5921	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. C		Earmarked for Friends of Joe Pitts		
	Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date 105.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) June Zeigler		Date of Receipt MM / DD / YYYY 07 / 03 / 2010		
	Mailing Address 2261 Warren Dr		<b>Transaction ID:</b> 355C88A689E50F008C7		
	City Morristown	State TN	Zip Code 37814-5921	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. C		Earmarked for Carly for California Inc		
	Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date 105.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) June Zeigler		Date of Receipt MM / DD / YYYY 07 / 03 / 2010		
	Mailing Address 2261 Warren Dr		<b>Transaction ID:</b> C41B84C467C1D45DD40		
	City Morristown	State TN	Zip Code 37814-5921	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. C		Earmarked for Friends of Sharron Angle		
	Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date 105.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	105.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 171 / 344  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial) Donald Zenk		Date of Receipt MM / DD / YYYY 07 / 13 / 2010
Mailing Address 602 31st St NW		<b>Transaction ID:</b> 8066343E2278CCEACB9
City Austin	State Zip Code MN 55912-9317	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer info requested	Occupation info requested	<b>[MEMO ITEM]</b> Earmarked for Friends of Sharron Angle
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

**B.**

Full Name (Last, First, Middle Initial) Donald Zenk		Date of Receipt MM / DD / YYYY 07 / 13 / 2010
Mailing Address 602 31st St NW		<b>Transaction ID:</b> 463E5DBFE9442D6D66A
City Austin	State Zip Code MN 55912-9317	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer info requested	Occupation info requested	<b>[MEMO ITEM]</b> Earmarked for Carly for California Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	45012.61

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Chain Bridge Bank <hr/> Mailing Address 1445-A Laughlin Avenue <hr/> City McLean State VA Zip Code 22101 <hr/> Purpose of Disbursement Bank Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: MEC3EEB58E30B4B105C5 Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2010
	Amount of Each Disbursement this Period 180.25
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Intuit Discount Bankcard <hr/> Mailing Address 2632 Marine Way <hr/> City Mountain View State CA Zip Code 94043 <hr/> Purpose of Disbursement Credit Card Processing Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V50DA4F8BF6ED7FFE258 Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2010
	Amount of Each Disbursement this Period 38.39
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Intuit Discount Bankcard <hr/> Mailing Address 2632 Marine Way <hr/> City Mountain View State CA Zip Code 94043 <hr/> Purpose of Disbursement Credit Card Processing Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: VF28F239EEDBB5DC7D74 Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2010
	Amount of Each Disbursement this Period 2.74
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

221.38

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 173 / 344

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Intuit Discount Bankcard</p> <p>Mailing Address 2632 Marine Way</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> VEBE350B345541A23BDD</p> <p>Date of Disbursement 07 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 61.10</p> <p>001 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Intuit Discount Bankcard</p> <p>Mailing Address 2632 Marine Way</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> V30E7E1900335318AEFC</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 14.77</p> <p>001 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Intuit Discount Bankcard</p> <p>Mailing Address 2632 Marine Way</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> VDDB80096C40EB7867AD</p> <p>Date of Disbursement 07 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 2.42</p> <p>001 Category/ Type</p>

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

78.29

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Intuit Discount Bankcard</p> <p>Mailing Address 2632 Marine Way</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> VDE702BFE756B58DD2DD</p> <p>Date of Disbursement 07 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 4.83</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Intuit Discount Bankcard</p> <p>Mailing Address 2632 Marine Way</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> V5316EC24B1888FA2D49</p> <p>Date of Disbursement 07 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 2.49</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kintera, Inc.</p> <p>Mailing Address DEPT AT 952208</p> <p>City Atlanta State GA Zip Code 31192-2208</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> VD762FD9A8A3EC932292</p> <p>Date of Disbursement 07 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 658.43</p> <p>001 Category/ Type</p>

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

665.75

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 175 / 344

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)  
Kintera, Inc.

Mailing Address DEPT AT 952208

City Atlanta State GA Zip Code 31192-2208

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: V7A6FE7B7E6459543793

Date of Disbursement

07 / 31 / 2010

Amount of Each Disbursement this Period

219.72

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

219.72

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

1185.14

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Bachmann for Congress	Transaction ID: X62910-26BACH
	Mailing Address PO Box 25950	Date of Disbursement 07 / 06 / 2010
	City Woodbury State MN Zip Code 55125	Amount of Each Disbursement this Period 25.00
	Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Earmarked by Sharo N. Doran

B.	Full Name (Last, First, Middle Initial) Bachmann for Congress	Transaction ID: X62910-32BACH
	Mailing Address PO Box 25950	Date of Disbursement 07 / 06 / 2010
	City Woodbury State MN Zip Code 55125	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Earmarked by Teresa Ezzell

C.	Full Name (Last, First, Middle Initial) Bachmann for Congress	Transaction ID: X62910-44BACH
	Mailing Address PO Box 25950	Date of Disbursement 07 / 06 / 2010
	City Woodbury State MN Zip Code 55125	Amount of Each Disbursement this Period 35.00
	Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Earmarked by Alfred H.

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Bachmann for Congress	Transaction ID: X62910-46BACH Date of Disbursement
	Mailing Address PO Box 25950	<input type="text" value="07"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Woodbury State MN Zip Code 55125	Amount of Each Disbursement this Period
	Purpose of Disbursement Transmitted by PAC Check	<input type="text" value="35.00"/>
	Candidate Name Michele M. Bachmann	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	[MEMO ITEM] Earmarked by Kathy Hall
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Bachmann for Congress	Transaction ID: X62910-78BACH Date of Disbursement
	Mailing Address PO Box 25950	<input type="text" value="07"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Woodbury State MN Zip Code 55125	Amount of Each Disbursement this Period
	Purpose of Disbursement Transmitted by PAC Check	<input type="text" value="10.00"/>
	Candidate Name Michele M. Bachmann	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	[MEMO ITEM] Earmarked by Sara Nevin
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bachmann for Congress	Transaction ID: X62910-87BACH Date of Disbursement
	Mailing Address PO Box 25950	<input type="text" value="07"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Woodbury State MN Zip Code 55125	Amount of Each Disbursement this Period
	Purpose of Disbursement Transmitted by PAC Check	<input type="text" value="100.00"/>
	Candidate Name Michele M. Bachmann	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	[MEMO ITEM] Earmarked by Larry Rastrelli
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X62910-63BACH <b>Date of Disbursement:</b> 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Philip Mason</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X62910-64BACH <b>Date of Disbursement:</b> 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Mary Maxian</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check 2010 Primary, earmarked 6/26-6/27 Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 98045DF00AAAA0EB0B0 <b>Date of Disbursement:</b> 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 390.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	390.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X9F751C241C3BE2448F Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 50.00
	<b>[MEMO ITEM]</b> Earmarked by Tim Nieman
	Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XDE275EF6779369E4B3 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 25.00
	<b>[MEMO ITEM]</b> Earmarked by Mary Bresnahan
	Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X68B838BE4908C5F87C Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 50.00
	<b>[MEMO ITEM]</b> Earmarked by Brian Van Gelder
	Category/Type 011

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement 2010 Primary, earmarked 6/30/2010 Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 24FFB3A0F375E0FB518 Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2010
	Amount of Each Disbursement this Period 125.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XAB3487C7920AC6046A Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2010
	Amount of Each Disbursement this Period 10.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X146419B4CD408B878C Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2010
	Amount of Each Disbursement this Period 35.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
Earmarked by Genevieve Jones

**[MEMO ITEM]**  
Earmarked by Elaine Cullen

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

125.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement 2010 Primary, earmarked 7/1/2010 Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: C699C76D216214A6732 Date of Disbursement 07 / 09 / 2010
	Amount of Each Disbursement this Period 45.00
	Category/ Type 011
	[MEMO ITEM] Earmarked by Sonja Berthi- aume
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X28CBAC8D02A3B4DEDD Date of Disbursement 07 / 12 / 2010
	Amount of Each Disbursement this Period 35.00
	Category/ Type 011
	[MEMO ITEM] Earmarked by Barbara Laco- ur
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XE0C4CA164C4006DE63 Date of Disbursement 07 / 12 / 2010
	Amount of Each Disbursement this Period 20.00
	Category/ Type 011
	[MEMO ITEM] Earmarked by Barbara Laco- ur

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

45.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X31005E6D91EA8AC83C <b>Date of Disbursement:</b> 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Louise Meehan</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X5D86B1627A9CAE363A <b>Date of Disbursement:</b> 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Bettina Nolan</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XCDCF0154A4FA2064CC <b>Date of Disbursement:</b> 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Alex Woehr</p>

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress  Mailing Address PO Box 25950  City Woodbury State MN Zip Code 55125  Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XA4CFBB987CE16BE0E5 Date of Disbursement 07 / 12 / 2010
	Amount of Each Disbursement this Period 25.00
	[MEMO ITEM] Earmarked by Christopher Sollog
	Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress  Mailing Address PO Box 25950  City Woodbury State MN Zip Code 55125  Purpose of Disbursement 2010 Primary, earmarked 7/3/2010 Candidate Name Michele M. Bachmann  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 23CB86114BB4610D2EC Date of Disbursement 07 / 13 / 2010
	Amount of Each Disbursement this Period 185.00
	Category/Type 011
	[MEMO ITEM] Earmarked by Patricia Dibella
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress  Mailing Address PO Box 25950  City Woodbury State MN Zip Code 55125  Purpose of Disbursement PAC Check Candidate Name Michele M. Bachmann  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X8BE56C34FF3B5ED6F5 Date of Disbursement 07 / 13 / 2010
	Amount of Each Disbursement this Period 9.12
	Category/Type 011
	[MEMO ITEM] Earmarked by Patricia Dibella

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

185.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement PAC Check Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X584F09750D703CB98B Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 1 0
	Amount of Each Disbursement this Period 50.00
	<b>[MEMO ITEM]</b> Earmarked by Ann Reed
	Category/ Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement 2010 Primary, earmarked 7/4-7/5 Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E2D273A5B99B694444F Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 1 0
	Amount of Each Disbursement this Period 59.12
	Category/ Type 011
	Category/ Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement 2010 Primary, earmarked 7/9/2010 Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: A5B71E6538EFD9E3EAF Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 952.00
	Category/ Type 011
	Category/ Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1011.12
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress  Mailing Address PO Box 25950  City Woodbury State MN Zip Code 55125  Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X8AC9F399D949A65D75 Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 25.00
	<b>[MEMO ITEM]</b> Earmarked by G. Joan Bare-tincic
	Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress  Mailing Address PO Box 25950  City Woodbury State MN Zip Code 55125  Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X92D39407F41E9EB69A Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 12.00
	<b>[MEMO ITEM]</b> Earmarked by Dennis Bonil-la
	Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress  Mailing Address PO Box 25950  City Woodbury State MN Zip Code 55125  Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XD83BBCC437E623A83F Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 50.00
	<b>[MEMO ITEM]</b> Earmarked by John and Mary Ann Charlesworth
	Category/Type 011

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XD0FFA1977CAEB5B770 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Martin Davis</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X92DD541026A9D7014C <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Brian Dubicki</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X36CD8B8D1A69D8F142 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Rosemary Ful-ler</p>

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

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XBBCAFA34839ED5AC07 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Paul Gamman</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X93213698D2EB318141 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Edward Gansberg</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XBB9D4203973AD7BF85 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Thomas Gennings</p>

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XE7387E70E2E4036D25 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by H. Hansmann</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X97A6F586CFC583D05C <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Rhonda Juve</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X28A179DD5F42D577C1 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Tom Meyer</p>

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X527EBCFC6F87C1CA11 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Brian &amp; Esther Newton</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XBA81716A7127EC11FF <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Jeanne Robertson</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X040FA0CB10C1BE7B94 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Suzanne Roehm</p>

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X651CDE18AC5BD853D6 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Louis Rose</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X682CBDDEE016ADAB92 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Kathryn Schaplaz</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X0455D99DBAEE563610 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Deb Sievers</p>

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X1E703CFCA9C94B1309 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Billy Volner</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X25A04AEF7FC97C1FE1 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Mary Wolosek</p>

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

0.00

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

**SCHEDULE B (FEC Form 3X)  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X216A78F80D4F54D3E6 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b> Earmarked by Robert and Wanda Hayes
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X06BE92E858CB8AD6F4 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b> Earmarked by Lillian Ammann
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XCBF332A24607DD64A7 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b> Earmarked by Susan Anthony

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

0.00

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



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

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X7B7D67DC8421589000 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 34.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Ben and Claire Aragon</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XD04E40FF7A8ED1FED9 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Stephen Beach</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X9DC71F125C3B0F29FF <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Janet Beckley</p>

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress  Mailing Address PO Box 25950  City Woodbury State MN Zip Code 55125  Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XED72C7F918D38CD5CF Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 35.00
	[MEMO ITEM] Earmarked by Janice Bennett
	Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress  Mailing Address PO Box 25950  City Woodbury State MN Zip Code 55125  Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XF5AA1539405214CE37 Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 50.00
	[MEMO ITEM] Earmarked by Jeanne Berhost
	Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress  Mailing Address PO Box 25950  City Woodbury State MN Zip Code 55125  Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X3EA361ECF6E5285A30 Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 35.00
	[MEMO ITEM] Earmarked by Mary Berigan
	Category/Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X6819216ACE8E83A667 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Rebecca Bianco</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X2552951DAEF4D9085A <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Michael Boldrick</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XF131CEBE3EFF03F713 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Mary Bowman</p>

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XA4989E1CAA4006BEA7 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by George R. (B-ob) Bramer</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XCA50A44A439CB9DF83 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Mary Breaux</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X94268A1E306BD132A8 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Katarzyna Buchen</p>

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X61EF5759FAD9F6F056 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Steven Bulack</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X1D8ABA4A72893627CC <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Stephen Bussa</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X4634B42D98367693AB <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Carolyn Cantrell</p>

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X8E1D631E84D9461342 Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b> Earmarked by Agnes Carpenter
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XA0A7F384AD66AD1637 Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b> Earmarked by Gloria Caude- ra
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X23CF66F79F4F03E1FE Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b> Earmarked by Richard Cham- pagne

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X06B13FC261D6E6AE99 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Ronald Chu</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X606AC04C81AA880323 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Bernadette Rowen</p>

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XFCAC0496A259BBC810 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Marilyn Schempansky</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X87E7FF4D73A3083B24 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 5.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Susan Hunt</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X83A9F9A71C74C8A2DF <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Herbert Seigler</p>

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

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

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X3C8F8D0A88B85E441D <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Iris Clough</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X46B225379EDD6B2595 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Margaret Siebert</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XD01E93417C10C88B97 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by David Keiper</p>

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

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

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XEA3604FAB2629B2DF6 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Maria Coleman</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X513369856A183E3159 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Racquel Skold</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X2F3B8CEFBF25915483 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Barbara Smith</p>

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

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X92F6206EC7A6EA2E1D <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Jim Keller</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XB296FDDE196017E851 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Christine Kohr</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XA0FE06F4A1B9A6E20C <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Joann Cooper</p>

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X8A757CAAFBAD9D7688 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Deborah Smith</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X91CBCF2A3CE28E43FE <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by David Krzak</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XE4954F3AEF6EDE500B <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Victoria Coos</p>

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

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

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FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X939002159A1D377579</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Matt LaLonde</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X076CC39222AA4C1AE8</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Christine Lay</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XA74B6253796941D5B8</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Rosemarie Smith</p>

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

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XDF6FA5B55B484B2CD9 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Gregory Smith</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X1E76CC89223CCA2D2E <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by James Lukavsky, MD</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X029FC67DE9B1E16DBD <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Donna Lyons</p>

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

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XB0104DE20A8C4FE0E5 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><b>[MEMO ITEM]</b> Earmarked by John Mack</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X42E4743F6FDFD001FB <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Jean Costello</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X8E8FF2F41D21E5D978 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 30.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Edwin Madeir-OS</p>

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XDEEC2C979A07591307 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Rebecca Maki</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XE94BC112D72A8C70C4 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Robert Solomon</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XB877D3F02CD6508445 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Robert Martinez</p>

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

0.00

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X021D68F58B6071D528 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Elizabeth Craine</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XD93CAEC00D4BFAE686 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Terry Stephan</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X260B75C52EC8F7C66B <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Philip Mason</p>

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XF817A8AB82E291E36F <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Kim Stewart</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X8B66F9497F8E52A012 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by John Stocks</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X4B738AB10DF794B157 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Helen McDonough</p>

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

0.00

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

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

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for each category of the  
Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XD95991627B8B64B609 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 100.00  [MEMO ITEM] Earmarked by Janette McDugald
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XD5EEEEFF6E48157EB94 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 50.00  [MEMO ITEM] Earmarked by Thomas Ternus
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XA7DDE6D8FC380FA626 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 35.00  [MEMO ITEM] Earmarked by Wesley Crowl

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X7D61E4273CAC629770</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Yunyong McLain</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XCDE88734950E6E8E00</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Gneal Trevethan</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X86B29C19B459BF1A44</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Dennis Czurylo</p>

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

0.00

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XE0C508AEF531002B00 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Mindy Merrill</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X464C3958387608085B <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Marion Miller</p>

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

0.00

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

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PAGE 214 / 344

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X78D1A3B5D86417B3B8 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Susie Dake</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XA03B0A63DF97B2E230 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Carolyn Vail</p>

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

0.00

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<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X6D92031B08CC860894 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Susan Morgan</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X0969D9FEF01D2CC8BE <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Tate Nagengast</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

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**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X51C2AFD037D2AF78EA <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by John Vaught</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X6A1007D71B14A56542 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Suzanne Paradis</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X7C1A69779A31CD6700 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Susan Vontersch</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XF81704AFC1F78FE9EE <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Regina Wells</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X1AF7A14476E5C94B6E <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Richard Park</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X67DB50031AE3D93EA8 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Melissa Wilson</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XBEA7795E3BC5F8F7D6 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Mallory Quigley</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XA4B57AA36A54765A91 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Robin York</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X57C7E1B8EE8C4C2753 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Vernon Reeh</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

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**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XF7598C258490F7B3F1 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Eric Gorr</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X85AD55D6887A6E3777 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by William Rado- vich</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X4192DB6E1287A79867 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Danita Grant</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

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**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X97C867B6230CEA6F02 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by David Rowe</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X6C3D8F006BC44D5B72 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Richard Grubb</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X3A0E35BA3718125D0F <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Peter Dapice</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

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**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X1C27812EE4CC126EEB <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 5.50</p> <p><b>[MEMO ITEM]</b> Earmarked by Michael Hahn</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XFE870F4C72DE8F53B1 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Clyde &amp; Patricia Dorn</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X14FBE00FF4EC70DA98 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Ronald DuBois</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
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PAGE 222 / 344

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XED74DC50C5D1E16B45 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Margene Eiguren</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XC3C85EB56093CE20E1 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Joanne English</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X8DFBA5CDC7290C3BDF <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Karen Falkowski</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XCAC69145CF3F31DCFE <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Lisa N. Ferguson</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X05CE7CE533D670F3EB <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Thomas Ferrara</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X5F5AC8230BBA895CAE <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Jean-Claude Gagnebin</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X6F07F73ADC02344583</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Donald Galam-aga</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XA65ED35294E7D34D87</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Dick Giuffre</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X018E92D5EA3533D516</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Herman Gleic-her</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X09FDD879407F4D30F5 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Stephen Godsall</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X114D4F779970AADADD <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Marci Goodwin</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XCB7B94C6C5A3E4ACBD <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Tania Hake</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X1A6BB7AA1B0FA88069</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Roger Hall</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XF3116D2737C7BE187F</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Dorothy Hamilton</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X658D283EA94732CBA5</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Brian Hansen</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X930D506AC544E09581 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Frances Hardart</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X4DF720BF33FEAD74B8 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Phil Harris</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X24601B7AB6AC3CA857 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Sherri Henson</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X76BEB0CFD4846C7762</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Ronald Hicks</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X18380452259F5F7881</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Celeste Hill</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X48D5A597F47313190B</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Christine Holley</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X5AEC748D3C41A1F703</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Shannon Houtrouw</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XAEF8F549886B088575</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Jane Jessey</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X62C19DCB844FA0C306</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Karen Kline</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress  Mailing Address PO Box 25950  City Woodbury State MN Zip Code 55125  Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X1D58A4195FB41E3E3A Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 35.00
	[MEMO ITEM] Earmarked by Kathleen Lar-more
	Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress  Mailing Address PO Box 25950  City Woodbury State MN Zip Code 55125  Purpose of Disbursement 2010 Primary, earmarked 7/6/2010 Candidate Name Michele M. Bachmann  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 798E8B282FA7E23769D Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 45.00
	Category/Type 011
	Earmarked by Jhony Acosta
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress  Mailing Address PO Box 25950  City Woodbury State MN Zip Code 55125  Purpose of Disbursement PAC Check Candidate Name Michele M. Bachmann  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X22B655A98470CAB90D Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 35.00
	Earmarked by Jhony Acosta
	Category/Type 011

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

80.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement 2010 Primary, Earmarked 7/8/2010 Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: A1982B8430F51D7BB95 Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 4264.50
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement 2010 Primary, earmarked 7/10-7/11 Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 4485E98D617FF4D8890 Date of Disbursement 07 / 19 / 2010
	Amount of Each Disbursement this Period 150.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement PAC Check Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X37A5FC828B183849C8 Date of Disbursement 07 / 19 / 2010
	Amount of Each Disbursement this Period 50.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
Earmarked by Frank Montez

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4414.50

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement PAC Check Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X53A64FE388424BCF1B Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2010
	Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b> Earmarked by Kelly Schack
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XD68362011D58D7E313 Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2010
	Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b> Earmarked by Judy Kasza
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X00B9FAC94947673C6F Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2010
	Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b> Earmarked by Frank Person

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XF39680363EA771F88E <b>Date of Disbursement:</b> 07 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Theresa Adams</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X590B3F50F2ED67E15D <b>Date of Disbursement:</b> 07 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Nancy Bricelli</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X83B9538BDD143A0D00 <b>Date of Disbursement:</b> 07 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Gerard Maestretti</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement 2010 Primary, earmarked cont 7/12/10</p> <p>Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> A70F4CBDB8ECECCD281</p> <p>Date of Disbursement 07 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 160.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XB569C2D5EF121E8658</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p>011 Category/ Type</p> <p><b>[MEMO ITEM]</b> Earmarked by Gretchen Reese</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X81FC5933452859BB39</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p>011 Category/ Type</p> <p><b>[MEMO ITEM]</b> Earmarked by Sande Duncan</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

160.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress  Mailing Address PO Box 25950  City Woodbury State MN Zip Code 55125  Purpose of Disbursement PAC Check Candidate Name Michele M. Bachmann  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X3F160511BB5B856EAA Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 35.00
	[MEMO ITEM] Earmarked by Sandy Cobb
	Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress  Mailing Address PO Box 25950  City Woodbury State MN Zip Code 55125  Purpose of Disbursement 2010 Primary, Earmarked 7/14-7/15 Candidate Name Michele M. Bachmann  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: F8758AF3E7BA1DBA44C Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 105.00
	Category/Type 011
	Earmarked by Barbara Rams-ey
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress  Mailing Address PO Box 25950  City Woodbury State MN Zip Code 55125  Purpose of Disbursement PAC Check Candidate Name Michele M. Bachmann  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XB3D233E0C12FDA03FE Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 10.00
	Earmarked by Barbara Rams-ey
	Category/Type 011

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

115.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement PAC Check Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XC6C297476C4F9BBC83 Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 25.00
	Earmarked by Donna Trent
	Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement PAC Check Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XAAC56853AB5C65C500 Date of Disbursement 07 / 28 / 2010
	Amount of Each Disbursement this Period 20.00
	Earmarked by Norma Llorca
	Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XDF919CD5EBA14910AB Date of Disbursement 07 / 29 / 2010
	Amount of Each Disbursement this Period 25.00
	[MEMO ITEM] Earmarked by Ellen Sheridan
	Category/Type 011

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

45.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X1012C0C4ED9F3280B3 Date of Disbursement 07 / 29 / 2010
	Amount of Each Disbursement this Period 100.00
	[MEMO ITEM] Earmarked by Bonnie Pfaff
	Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XD6FB9FF1051BE9969D Date of Disbursement 07 / 29 / 2010
	Amount of Each Disbursement this Period 20.00
	[MEMO ITEM] Earmarked by Janet Lederer
	Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Michele M. Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X7F1AECDD62356D76873 Date of Disbursement 07 / 29 / 2010
	Amount of Each Disbursement this Period 10.00
	[MEMO ITEM] Earmarked by Mary Johnson
	Category/Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bachmann for Congress</p> <p>Mailing Address PO Box 25950</p> <p>City Woodbury State MN Zip Code 55125</p> <p>Purpose of Disbursement 2010 Primary, Earmarked 7/22/2010</p> <p>Candidate Name Michele M. Bachmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7686116207300E6366C</p> <p>Date of Disbursement 07 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 155.00</p> <p>011 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Candice Miller for Congress</p> <p>Mailing Address PO Box 182152</p> <p>City Shelby Township State MI Zip Code 48318</p> <p>Purpose of Disbursement PAC Check</p> <p>Candidate Name Candice S. Miller</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 10</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X16815B57A3BB1C5A2B</p> <p>Date of Disbursement 07 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p>011 Category/ Type</p> <p>Earmarked by Barbara Laco-ur</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Candice Miller for Congress</p> <p>Mailing Address PO Box 182152</p> <p>City Shelby Township State MI Zip Code 48318</p> <p>Purpose of Disbursement PAC Check</p> <p>Candidate Name Candice S. Miller</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 10</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XBA09437980BC7EFF9E</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>011 Category/ Type</p> <p>Earmarked by Paul Beauregard</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

215.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Candice Miller for Congress</p> <p>Mailing Address PO Box 182152</p> <p>City Shelby Township State MI Zip Code 48318</p> <p>Purpose of Disbursement PAC Check</p> <p>Candidate Name Candice S. Miller</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 10</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XDDFAAE14E36FAD943F</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p>011 Category/ Type</p> <p>Earmarked by Karen Kline</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement 2010 General, earmarked 6/28/10</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D952FFE3E21C6806E38</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 1013.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XEDA115213A4F8A9A20</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>011 Category/ Type</p> <p>Earmarked by Patricia Loe-ken</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1123.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement 2010 General, earmarked 6/30</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> C6EBE7715083937FA41</p> <p>Date of Disbursement MM / DD / YYYY 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B42AC25EF1CFFDEC46B</p> <p>Date of Disbursement MM / DD / YYYY 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 30.00</p> <p>011 Category/ Type</p> <p><b>[MEMO ITEM]</b> Earmarked by Patricia Dit- rio</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B468855421C6255D01B</p> <p>Date of Disbursement MM / DD / YYYY 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>011 Category/ Type</p> <p><b>[MEMO ITEM]</b> Earmarked by Thomas Hartch</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

150.00

**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X3A27D415300D4C9C30 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Louis Potempa</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XF83E3D447834DB41D1 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Hattie Lewis</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X7A11A2A71016A2B222 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Bridget Johnston</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 242 / 344

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc Mailing Address 520 Capitol Mall Suite 220 City Sacramento State CA Zip Code 95814 Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X67890AFE09720E2C91 Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2010
	Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Robert Nerbun	

<b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc Mailing Address 520 Capitol Mall Suite 220 City Sacramento State CA Zip Code 95814 Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X1646C012DAC8ABDDC3 Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2010
	Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Mary Bresnahan	

<b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc Mailing Address 520 Capitol Mall Suite 220 City Sacramento State CA Zip Code 95814 Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BECB259683661088E27 Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2010
	Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Janet Hyrb	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B6E16B33A14D2D9A91D <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Scott Bulman</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BE1D7A531C74F949FCA <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Edward Crabtree</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B3221E206A37A6ABD8C <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by John Sweeney</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B4E40C756EB844C6A13</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Jerry Boismier</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B5E1C144A46B8EAF7A4</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Christine Barr</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BEB16773CE635B8BA58</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Arthur Moloney</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B4AFA8FFC361F0EF60D <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 45.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Richard Eykholt</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BA1E3AB25C903CAA94C <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 75.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Shauna Carr</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B10D5ED1D3EBEB3754E <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Patty Cafferata</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XAAD84374ED0252C1B4 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Kenneth Davis</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X3F5E021104DF76C9BD <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 30.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Morris Grimm-itt</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X8637532F93F79AF238 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Dorothy Clem-ens</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XEE577E88121C9E8CAC Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2010
	Amount of Each Disbursement this Period 33.00  <b>[MEMO ITEM]</b> Earmarked by Kenneth Pelz
<b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X220388F90803D72243 Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2010
	Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b> Earmarked by Veronica Louis
<b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X5E5D4D6CC2DDC572B0 Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2010
	Amount of Each Disbursement this Period 60.00  <b>[MEMO ITEM]</b> Earmarked by Karin Buehler

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X333CF71877E72AECE3 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Joseph Ponzi</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XDB13335378F478FA46 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Joan Reitz</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XEF314685AB0D218044 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Larry Bale</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Carly for California Inc	Transaction ID: X1FF7AF84B9D80EECD9
	Mailing Address 520 Capitol Mall Suite 220	Date of Disbursement 07 / 08 / 2010
	City Sacramento State CA Zip Code 95814	Amount of Each Disbursement this Period 5.00
	Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	[MEMO ITEM] Earmarked by Patricia Myers
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Carly for California Inc	Transaction ID: X54B46E4B5B4EC60DA7
	Mailing Address 520 Capitol Mall Suite 220	Date of Disbursement 07 / 08 / 2010
	City Sacramento State CA Zip Code 95814	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	[MEMO ITEM] Earmarked by Dennis Cox
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) Carly for California Inc	Transaction ID: XF24EA4CAD814739A23
	Mailing Address 520 Capitol Mall Suite 220	Date of Disbursement 07 / 08 / 2010
	City Sacramento State CA Zip Code 95814	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	[MEMO ITEM] Earmarked by Dennis Cox
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B9133EBCF518C23BD7E</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="60.00"/></p> <p><b>[MEMO ITEM]</b> Earmarked by Christina Skelley</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X92FFED8CA578C4F97E</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p><b>[MEMO ITEM]</b> Earmarked by John Beckwith</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X394894158EB7F496D5</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p><b>[MEMO ITEM]</b> Earmarked by Alden La Borde</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="0.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement PAC Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XFF704070035BAE91CF</p> <p>Date of Disbursement 07 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p>Earmarked by Genevieve Jones</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement 2010 General, earmarked 7/2/10</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> A73BF5EDFE88D7EF8C7</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 70.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XD201D3FC2E033275BC</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Barbara Lacour</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>80.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 252 / 344

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: XFA4137A8966FC78921</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Bettina Nolan</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: XB87DA25AAC8EFB2B57</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Debbie Sultan</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: XE64C910B200F3F00D5</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Alex Woehr</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 253 / 344

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X55C88A689E50F008C7</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by June Zeigler</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B5F84BC8AEAC63C1E9D</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Judith Warren</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BD4085933C02C2A90DB</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Adam Olis</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 254 / 344

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BDA81E13CE87791F637 <b>Date of Disbursement</b> 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Janet Klimczak</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B3DFA9F2A3774EE41D8 <b>Date of Disbursement</b> 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 30.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Lisa Vasko</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B9B20FDB0AFCA22E806 <b>Date of Disbursement</b> 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 40.00</p> <p><b>[MEMO ITEM]</b> Earmarked by B. Reynolds</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BD2996B5CE6BF76CFB8</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by James Boushor</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B9C4F1B2902ECE27247</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Gloria Mayoh</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X392CA2CAA378C1D0EA</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Beverly Wrig-ht</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X5C7C0B4F8BFDCCBC088 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 20.00  [MEMO ITEM] Earmarked by Roxanne Savaryn-Wicks
<b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement PAC Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X5A803B8F2232108C9D Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 1 0
	Amount of Each Disbursement this Period 50.00  Earmarked by Ann Reed
<b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement 2010 General, earmrked 7/3/2010 Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: F593D8114A24C0D2171 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 1 0
	Amount of Each Disbursement this Period 145.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

195.00

**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement 2010 General, 7/6 earmarked Candidate Name Carly Fiorina <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 8CA7E5901F549AADC69 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 720.00
	Category/ Type 011
	Earmarked by Jhony Acosta
<b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement 2010 General, earmarked 7/8 Candidate Name Carly Fiorina <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 79913037631B16B7B2B Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 200.00
	Category/ Type 011
	Earmarked by Jhony Acosta
<b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement PAC Check Candidate Name Carly Fiorina <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X1F4861449FD2B1AE69 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 35.00
	Category/ Type 011
	Earmarked by Jhony Acosta

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

955.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B35C980D41F8021CD43</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Richard Alvo-rd</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B42F99DAA246961F329</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Nancy Alvord</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XF0B9CB665BB194275B</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Edward Gansb-erg</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X026904B81B59A02C86 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Pauline Keinath</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X16BF9CAC088D62B61F <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Dennis Bakke</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XD70DD51897E6C2B7A7 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Lynda Bracken</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B227D5318D6FBB430C0 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00  <b>[MEMO ITEM]</b> Earmarked by Edward Mooney
<b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B7D47EC8284BE2A98E8 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b> Earmarked by Charles Hecht
<b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X404C42D36115D6A34C Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b> Earmarked by Bill Blatty

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X8F69E8A76A710CD550</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p><b>[MEMO ITEM]</b> Earmarked by Baker Smith</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B57A32A5E8A230EADE6</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p> <p><b>[MEMO ITEM]</b> Earmarked by Veronica Anderson</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B6B9C08755DDE022558</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="60.00"/></p> <p><b>[MEMO ITEM]</b> Earmarked by Stephen Demauri</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B5793B61EAB803D34DE <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Albert Ghirardelli</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BDCFC6ACBC217BC1A3D <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by John Graham</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B3087EE3C3D12160D1A <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Carmine Darcangelo</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B108D9800C2EB3CCDDF Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2010
	Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b> Earmarked by Ann Schutt
<b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B8573FE805E269FB4F6 Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2010
	Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b> Earmarked by Joseph Roach
<b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B3AF61F62D43EB43807 Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2010
	Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b> Earmarked by Joan Kondrac-ki

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BF86411D136734DCF8B Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 100.00  [MEMO ITEM] Earmarked by Marilyn Evans
<b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X24E92A101715343FD0 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 100.00  [MEMO ITEM] Earmarked by Karen Kline
<b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X8CD79C2BCA4AE5F3C2 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 35.00  [MEMO ITEM] Earmarked by Kathleen Lar- more

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X21FED30588B7C9E9EA <b>Date of Disbursement</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 40.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Dominick Minni</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X70B9DE4747986F641C <b>Date of Disbursement</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by James Caffrey</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X4DDF1283B5AE5C18F7 <b>Date of Disbursement</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Lorin Preston</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XF22AD14A243F9CDCC3 <b>Date of Disbursement</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Therese Lone-rgan</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X416A37D0D03806FD97 <b>Date of Disbursement</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Mary Johnson</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X2D8E8F80FE17523945 <b>Date of Disbursement</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by William Keefe</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X74D00771ECCBD80377 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Elsie Lewis</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X623B05D403115F635A <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Travis Rankin</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X581AC76DA8AC9745EB <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Robert Shaw</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement 2010 General, earmarked 7/16/10 Candidate Name Carly Fiorina <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1B28019E83417D71A7C Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2010
	Amount of Each Disbursement this Period 2035.00
	011 Category/ Type
	[MEMO ITEM] Earmarked by Ruth Gensman
<b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BF9E7529DC8F24869F7 Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2010
	Amount of Each Disbursement this Period 25.00
	011 Category/ Type
	[MEMO ITEM] Earmarked by Raymond Laur- ing
<b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B545780C8ED3AC3FEB7 Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2010
	Amount of Each Disbursement this Period 500.00
	011 Category/ Type
	[MEMO ITEM] Earmarked by Ruth Gensman

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2035.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CA District:</p>	<p><b>Transaction ID:</b> BDD727D474BB643DC7C</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><b>[MEMO ITEM]</b> Earmarked by John Hurley</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CA District:</p>	<p><b>Transaction ID:</b> B5DEC924DFD83878885</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by George Yoder</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CA District:</p>	<p><b>Transaction ID:</b> B2E3AB6753E5C407D15</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Patrick Kelly</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BADC37192C99FF6FF12 Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 4800.00
	<b>[MEMO ITEM]</b> Earmarked by Edward Stiker
	Category/ Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BE088138CEA52A6626F Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 1000.00
	<b>[MEMO ITEM]</b> Earmarked by Donna Hetland
	Category/ Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BE5876D4A14533D0478 Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 100.00
	<b>[MEMO ITEM]</b> Earmarked by Henry Neumann
	Category/ Type 011

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement 2010 General, Earmarked 7/13/10</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> F1546B6EB1E9422E58E</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 860.50</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement PAC Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XD8165E4388CC36B855</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>011 Category/ Type</p> <p>Earmarked by Thomas Burdick</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B8D7341BB8FE0A6A40C</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>011 Category/ Type</p> <p><b>[MEMO ITEM]</b> Earmarked by Stephen Czebiniak</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

960.50

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B323EEEE83F10C918CBD <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Ray Eneim</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BB20D1316783DC30288 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Jose Salazar</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BD3D0DC5E353A74231B <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Merlyn Mail-ian</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B9B065A219B5E6AE02E <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Joseph Nicholas</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B8FD85458F664B8CEBC <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Robin Barrett</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B27018BE0FF695E93C3 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Joseph Storch</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BBBCC41AB6991D66CBB Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 250.00  <b>[MEMO ITEM]</b> Earmarked by Joann Thomson
<b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B63E5DBFE9442D6D66A Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b> Earmarked by Donald Zenk
<b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B86403C51EA0715E4B2 Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b> Earmarked by Joanne Emmons

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BFEF5991331F343706B <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Cristine Rembold</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BEDD5796F3CADAC6F28 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Robert Ricco-mini</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B73B8A6DB4F66067C0D <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Lynne Rekowski</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B24D35578870338E7F1 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 55.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Carole McCarthy</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B16B2A140108F4296EF <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Michael Plunkett</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BEDCA3F83790A4CAB68 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Barbara Bowler</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B0337FD0E84E2CC35DF Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 75.00  <b>[MEMO ITEM]</b> Earmarked by Harold Milnes
<b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B1793A440F0206B8352 Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b> Earmarked by Constance Pauwels
<b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B64B6A25633AAE8C0BC Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 250.00  <b>[MEMO ITEM]</b> Earmarked by Eugene Scarberrry

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B3FD0A9F27BC441EE39</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by John Morton</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B04764B6DD896A5B38B</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Frank Espino- sa</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X7F1DCD00B986621F38</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Hilda Estefa- no</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

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**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X6FBD012D9D42D57DD8 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Shawn Paretti</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XD072320EBE0FFEA8E3 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 120.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Therese Grimm</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XE4530FFFB33FE057B4 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Rheba Snow</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X80AF60103AF706AFBE <b>Date of Disbursement</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by David Quinlan</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X2CCC70C1D27851E40B <b>Date of Disbursement</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Eugene Burke</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XAC2876B564BB90BBF9 <b>Date of Disbursement</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 4.00</p> <p><b>[MEMO ITEM]</b> Earmarked by John Schlapk-ohl</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

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**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X903EF2E2563E90EBBF <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 1.50</p> <p><b>[MEMO ITEM]</b> Earmarked by Clifton Courtney</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X6B0551F8299D8E3FB9 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Marilyn Boyer</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X54B2FE33DD351DC360 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Dorothy Popovich</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XE2672F09BD2A2EA508 Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 5.00  <b>[MEMO ITEM]</b> Earmarked by James Cumbie
<b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X26DEE809CC5BB5CF0D Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b> Earmarked by Paul Lauck
<b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc <hr/> Mailing Address 520 Capitol Mall Suite 220 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X4C5A9AAB92667B3A8A Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b> Earmarked by Teresa Maday

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XD9C8B68BC850ED6DBA <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 75.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Christine Sasan</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X5D54F0A3773944DEB8 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 40.00</p> <p><b>[MEMO ITEM]</b> Earmarked by L. Bippes</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XB6DE5C6BED74CE68EC <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 75.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Ruth Wood</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XDCEE72AF6F40C5D00D <b>Date of Disbursement</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Peter Snow</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XA3EC5C12853391EA17 <b>Date of Disbursement</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Robert Dreiling</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X9AE72BA438D1E8B5B0 <b>Date of Disbursement</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Teresa Fodor</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X6D1AAB4A029E68007F</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="23"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="60.00"/></p> <p><b>[MEMO ITEM]</b> Earmarked by Mary Minnet</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>2010 General, earmarked 7/21</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 2ABB6E313142FC8D91B</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="28"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="535.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B31E47451F2D60D1E5F</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="28"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p><b>[MEMO ITEM]</b> Earmarked by John Whitlock</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XEBE38EB4FF5B928DC2</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="35.00"/></p> <p><b>[MEMO ITEM]</b> Earmarked by Alice Nichols</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X61AE472A23F94E449B</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p><b>[MEMO ITEM]</b> Earmarked by Vincent Schmitz</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carly for California Inc</p> <p>Mailing Address 520 Capitol Mall Suite 220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Carly Fiorina</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B495038AFED368E2C20</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p><b>[MEMO ITEM]</b> Earmarked by Phillip Cuccia</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Joe Pitts</p> <p>Mailing Address PO Box 775</p> <p>City Unionville State PA Zip Code 19375</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Joseph R. Pitts</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 16</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: XDF3233AFE5B09FC88B</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Barbara Laco-ur</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Joe Pitts</p> <p>Mailing Address PO Box 775</p> <p>City Unionville State PA Zip Code 19375</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Joseph R. Pitts</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 16</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: X130DC379AD2C0CB008</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Louise Meehan</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Joe Pitts</p> <p>Mailing Address PO Box 775</p> <p>City Unionville State PA Zip Code 19375</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Joseph R. Pitts</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 16</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: X112BECAEBF99A54719</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by June Zeigler</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 288 / 344

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Joe Pitts <hr/> Mailing Address PO Box 775 <hr/> City Unionville State PA Zip Code 19375 <hr/> Purpose of Disbursement 2010 General, earmarked 7/3/2010 Candidate Name Joseph R. Pitts <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 16 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 4000521878ADC85B9C6 Date of Disbursement 07 / 13 / 2010
	Amount of Each Disbursement this Period 80.00
	Category/ Type 011
	Earmarked by Karen Kline
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Joe Pitts <hr/> Mailing Address PO Box 775 <hr/> City Unionville State PA Zip Code 19375 <hr/> Purpose of Disbursement PAC Check Candidate Name Joseph R. Pitts <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 16 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X52C19A01F82304D3FA Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 10.00
	Category/ Type 011
	Earmarked by Karen Kline
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Kelly Ayotte <hr/> Mailing Address PO Box 233 <hr/> City Nashua State NH Zip Code 03061 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Kelly A. Ayotte <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D0D6C58985AF4EBAE3F Date of Disbursement 07 / 17 / 2010
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Earmarked by Karen Kline

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2590.00

**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B2C3C9684B1D365B8A9 Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2010
	Amount of Each Disbursement this Period 60.00
	<b>[MEMO ITEM]</b> Earmarked by Christina Skelley
	Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BE301CDD21B4AE4E817 Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2010
	Amount of Each Disbursement this Period 50.00
	<b>[MEMO ITEM]</b> Earmarked by Marian King
	Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XC904DD96EEF3C3939A Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2010
	Amount of Each Disbursement this Period 50.00
	<b>[MEMO ITEM]</b> Earmarked by John Beckwith
	Category/Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 290 / 344

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X535F15956D48F3C7BC</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Alden La Borde</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BAB5911A063473EECDA</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 30.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Patricia Ditrio</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BD83126C076920AD6F7</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Thomas Hartch</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B32AA3029C114EF5D4B Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Gil Waechter
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X63C88E8F9F7A3A9919 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Nancy Freeman
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X339522735D250A29A8 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Louis Potempa

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 292 / 344

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XED9D101025C5DB3CC0 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Hattie Lewis</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XF00874B6E9FD557BB4 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Bridget Johnston</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X1A114686BF957772E9 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Robert Nerbun</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement 2010 General, earmarked 6/28/10 Candidate Name Sharron Angle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B45320CD14A8BA52473 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 1088.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement 2010 General, earmarked 6/29/10 Candidate Name Sharron Angle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B48D05A6DCAE9A888CD Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement 2010 General, earmarked 6/30 Candidate Name Sharron Angle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2CA48E9EDD8BA9D6035 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 150.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1338.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B06B14B2E567AFD3F81</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Janet Hyrb</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B9AFD46C5E187853AFD</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by J. Chandler</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B9E2FAA4F339C634F77</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Scott Bulman</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B28C4BA0646B92BC1DB</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Edward Crabtree</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B26390700D4FA473966</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by John Sweeney</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B909677CD33C77C1887</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Jerry Boismier</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B1956EB7B5324B1C8C3</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Christine Barr</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B987DD8A6ECD34C6A9B</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Arthur Moloney</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B16ED153B1F71750C80</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 45.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Richard Eykholt</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B6011D6209647E34116</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Patty Cafferata</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X367CACDD1780355FA1</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Patricia Loeken</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X4B055E489D24D359F9</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Kenneth Davis</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XBA4B4C61DBC1D86F4 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 30.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Morris Grimm-itt</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X432DEB2A3B6033E4ED <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Dorothy Clem-ens</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X9C240EF10480B53998 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Carolyn Garr-etson</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 299 / 344

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X4FBE2728ECAF271411</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 33.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Kenneth Pelz</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X520170778558741406</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Veronica Louis</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X9EFCEDDDDD238B509DF</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Marjorie Espy</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X2BDABFDBB8EE526238 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Joseph Ponzi</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X001DBECDB403B0EB02 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Joan Reitz</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XF22880EF72A1832CA2 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Larry Bale</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Friends of Sharron Angle	Transaction ID: X2716EE8F3D24ED0615
	Mailing Address PO Box 33058	Date of Disbursement 07 / 08 / 2010
	City Reno State NV Zip Code 89533	Amount of Each Disbursement this Period 25.00
	Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:	[MEMO ITEM] Earmarked by Constance Burtcavage
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Friends of Sharron Angle	Transaction ID: X440D92A34BAE025C65
	Mailing Address PO Box 33058	Date of Disbursement 07 / 08 / 2010
	City Reno State NV Zip Code 89533	Amount of Each Disbursement this Period 5.00
	Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:	[MEMO ITEM] Earmarked by Patricia Myers
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Friends of Sharron Angle	Transaction ID: X991A74A9CC74053028
	Mailing Address PO Box 33058	Date of Disbursement 07 / 08 / 2010
	City Reno State NV Zip Code 89533	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:	[MEMO ITEM] Earmarked by Dennis Cox
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ..... ▶

0.00

TOTAL This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X4A07A96E9A2AF6241D Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2010
	Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Dennis Cox
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XF7C0EECA1B8C32667C Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2010
	Amount of Each Disbursement this Period 10.00 Earmarked by Genevieve Jones
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement 2010 General, earmarked 7/2/10 Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: A9F49B60D34AF7DF393 Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2010
	Amount of Each Disbursement this Period 70.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

80.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X39B15BBB2BAD87E80A <b>Date of Disbursement:</b> 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Barton Hartzell</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X866C466C96123EDAD2 <b>Date of Disbursement:</b> 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Barbara Lacour</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X277D3EC2A3FF2AB8CD <b>Date of Disbursement:</b> 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Angela Montgomery</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X8ECDF99C1B8FA88D48 <b>Date of Disbursement:</b> 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Bettina Nolan</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X2ABAFB42301B9929A0 <b>Date of Disbursement:</b> 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 5.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Robert Solomon</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XCD06C2D73AD3DD1E9F <b>Date of Disbursement:</b> 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Jose Torres</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X41B84C467C1D45DD40 Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2010
	Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b> Earmarked by June Zeigler
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B3D57F1C7064035181D Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2010
	Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b> Earmarked by Adam Olis
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BB25C6E3378C45C9D36 Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2010
	Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b> Earmarked by Judith Warren

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BD2F1DC8DCC60633447</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Janet Klimczak</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B1417333309BD96FDC0</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 30.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Lisa Vasko</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B5CB95849A841440494</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by James Boushor</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B6E2CF82A3911027F79</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Gloria Mayoh</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X9BD14AD166915B0902</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Beverly Wright</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X6D41B38CBB09982CAE</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Roxanne Savaryn-Wicks</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement 2010 General, earmarked 7/3 Candidate Name Sharron Angle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2F1E13F4D8E0D343AF Date of Disbursement 07 / 13 / 2010
	Amount of Each Disbursement this Period 175.00
	011 Category/ Type
	Earmarked by Ann Reed
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement PAC Check Candidate Name Sharron Angle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X5453AE6A33A3DFAEAE Date of Disbursement 07 / 13 / 2010
	Amount of Each Disbursement this Period 50.00
	011 Category/ Type
	Earmarked by Ann Reed
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement 2010 General, earmarked 7/6/2010 Candidate Name Sharron Angle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 45F4E0FC49AC7994399 Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 400.00
	011 Category/ Type
	Earmarked by Ann Reed

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**625.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Friends of Sharron Angle	Transaction ID: E4F084EFEFB42C2D4D7
	Mailing Address PO Box 33058	Date of Disbursement 07 / 16 / 2010
	City Reno State NV Zip Code 89533	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement 2010 General, earmarked 7/8	011 Category/ Type
	Candidate Name Sharron Angle	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of Sharron Angle	Transaction ID: X0D092134CCAED26372
	Mailing Address PO Box 33058	Date of Disbursement 07 / 16 / 2010
	City Reno State NV Zip Code 89533	Amount of Each Disbursement this Period 35.00
	Purpose of Disbursement Transmitted by PAC Check	011 Category/ Type
	Candidate Name Sharron Angle	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
Earmarked by Edward Gansberg

C.	Full Name (Last, First, Middle Initial) Friends of Sharron Angle	Transaction ID: XE01C517F02B9878027
	Mailing Address PO Box 33058	Date of Disbursement 07 / 16 / 2010
	City Reno State NV Zip Code 89533	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Transmitted by PAC Check	011 Category/ Type
	Candidate Name Sharron Angle	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
Earmarked by Pauline Keinath

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XBE4F1D294E249F68F0 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Dennis Bakke</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X5A39A53F3695F9C1EA <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Lynda Bracken</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check 2010 General, earmarked 7/9/2010 Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 8D5870891FD5CD03828 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 2060.00</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2060.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B59D8599F3A2644ABE1 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Edward Mooney</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B08916840CC79EE1FEF <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Charles Hecht</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XF4B58B9F3140B6BC14 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Bill Blatty</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X66D42CE42656CD01D4 Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2010
	Amount of Each Disbursement this Period 100.00 <b>[MEMO ITEM]</b> Earmarked by Baker Smith
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BD94DCED9F586A2507C Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2010
	Amount of Each Disbursement this Period 200.00 <b>[MEMO ITEM]</b> Earmarked by Veronica Anderson
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B1313657D786CD61F60 Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2010
	Amount of Each Disbursement this Period 60.00 <b>[MEMO ITEM]</b> Earmarked by Stephen Demauri

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B7BFB041CC628AA4873 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b> Earmarked by Albert Ghirardelli
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B8BF69902251DFA5649 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b> Earmarked by Elena Miyares
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B527398A35B0B173FE9 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b> Earmarked by John Graham

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B455FD9016E43AFC3AF <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Carmine Darc-angelo</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BF91AB8A26AA76FF7B0 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Joanne Aarse-th</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B2039B732E45EA61C00 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Carole Gangl-off</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BC08287027D18A70328 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 400.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Ann Schutt</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BD545A8A91623476E31 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Joseph Roach</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B4D554DECF8F358B745 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Karen Pomes</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B19DC8CA61536879987</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Joan Kondrac-ki</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B26694501C305E1D653</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Marilyn Evans</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X97D41531B597D9007A</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Karen Kline</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X612618BAD00588DC31 Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 35.00 [MEMO ITEM] Earmarked by Kathleen Lar-more
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X5007BF562B12867FD8 Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 60.00 [MEMO ITEM] Earmarked by Dominick Min-ni
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X642FAD04AFBA7951C3 Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by James Caffrey

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X542BB57B58092B739C <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Lorin Preston</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X8DC474C983B5F942EE <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Mary Johnson</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XC40F59EEBAC9249420 <b>Date of Disbursement:</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by William Keefe</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X9C5F998110887CBAF5 <b>Date of Disbursement</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Elsie Lewis</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X77D88EE758AD9E4721 <b>Date of Disbursement</b> 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Robert Shaw</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B7AF7797490BB50E251 <b>Date of Disbursement</b> 07 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Ruth Gensman</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B53888712730A535885 <b>Date of Disbursement:</b> 07 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Raymond Laur-ing</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B9A96E6D4A1D4F96860 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><b>[MEMO ITEM]</b> Earmarked by John Hurley</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B5F00E80969A7B33D6F <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Kay Sheldon</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BB6AEEA40A51537E972 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b> Earmarked by George Yoder</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BF39A42924BEC31BC27 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Patrick Kelly</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BE5547156630413D241 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 4800.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Edward Stiker</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BC67E622ACAC28807D6 <b>Date of Disbursement</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Donna Hetland</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B69255098A11067F2D1 <b>Date of Disbursement</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Henry Neumann</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check 2010 General, earmarked 7/13 Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 9B8722F0ECE5192FAEF <b>Date of Disbursement</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 411.50</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

411.50

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
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<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement PAC Check Candidate Name Sharron Angle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X3E1DB41A6AABD1072D Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 100.00
	Earmarked by Thomas Burdick
	Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement PAC Check Candidate Name Sharron Angle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XD0F2A3310426DFE0AC Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 1000.00
	Earmarked by Gregory Mueller
	Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B269A148522BAA550A1 Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 50.00
	[MEMO ITEM] Earmarked by Frank Espinosa
	Category/Type 011

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1100.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B984630563593E86638 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Stephen Czebiniak</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B48160E34CE94110682 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Ray Eneim</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B625F9572F50BF520F7 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Jose Salazar</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BAB352BF310BD5A6C30</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Merlyn Maillian</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BE565EDE9D883DC0EF1</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Joseph Nicholas</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B442956675944BBC1A9</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Joseph Storch</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B417CAE2CC69EDB8665 Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 250.00  <b>[MEMO ITEM]</b> Earmarked by Joann Thomson
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B066343E2278CCEACB9 Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b> Earmarked by Donald Zenk
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B82357DD1EA0AE24B91 Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b> Earmarked by Joanne Emmons

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 0.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BCFF836D81153B9F41E <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Cristine Rembold</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BF2E55F4819EAF3F905 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Robert Riccomini</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B92C7228953577EEB56 <b>Date of Disbursement:</b> 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Lynne Rekowski</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B1D07F99F331FD64F27</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 55.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Carole McCarthy</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B6475051A291146CC83</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Michael Plunkett</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B67B4FDF36EB39094D6</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Constance Pauwels</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B328B525DDD90660F2F Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 15.00  <b>[MEMO ITEM]</b> Earmarked by Richard Welborn
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B8D3B1A6A6534F51322 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b> Earmarked by Larry Walsh
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B7B14DDAA512DE79F65 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b> Earmarked by Robin Barrett

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B17C1A92F735F5CC00F Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 250.00
	<b>[MEMO ITEM]</b> Earmarked by Eugene Scarberry
	Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BCB1C7A153D4C35284D Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 25.00
	<b>[MEMO ITEM]</b> Earmarked by Ruthie Scheidel
	Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B111D705F08A623407F Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 200.00
	<b>[MEMO ITEM]</b> Earmarked by Richard Gable
	Category/Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 331 / 344

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B7650DDDD111FFF4F1C Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by John Morton
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XB2FC33C9ED56167A5F Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 15.00 [MEMO ITEM] Earmarked by Hilda Estefano
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X4091019C26EF221AEF Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Shawn Paretti

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

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PAGE 332 / 344

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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	Amount of Each Disbursement this Period 25.00
	<b>[MEMO ITEM]</b> Earmarked by Mary Joseph
	Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X18CC3AA74F2D7957BC Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 10.00
	<b>[MEMO ITEM]</b> Earmarked by Rheba Snow
	Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X1E3D2F0AB27AD87314 Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 100.00
	<b>[MEMO ITEM]</b> Earmarked by David Quinlan
	Category/Type 011

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XA7CC065436CADAC470 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b> Earmarked by Eugene Burke
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XA05188653318D294FC Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 1.50  <b>[MEMO ITEM]</b> Earmarked by Clifton Courtney
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XA5EFCDE8912A4FB81D Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b> Earmarked by Dorothy Popovich

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 0.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XF0141B397C0C985248 Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 5.00 [MEMO ITEM] Earmarked by James Cumbie
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X23A0CA2F984D1EB613 Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Paul Lauck
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X7300D974FD31CD65 Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Teresa Maday

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 335 / 344

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XA0D466FDACB5EA2289</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Peter Snow</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X50F96EE792D7DF84C5</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Robert Dreiling</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XB13488F2B178EEFC6E</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Teresa Fodor</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B4DAB34A62904E733C8</p> <p>Date of Disbursement 07 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><b>[MEMO ITEM]</b> Earmarked by John Whitlock</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XCAD8D994E92BDF31B5</p> <p>Date of Disbursement 07 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Earmarked by John E. Dollinger</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle</p> <p>Mailing Address PO Box 33058</p> <p>City Reno State NV Zip Code 89533</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Sharron Angle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XFEBDE13DE2950064BE</p> <p>Date of Disbursement 07 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Alice Nichols</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:	Transaction ID: X90AB5C880739915F4A Date of Disbursement 07 / 28 / 2010
	Amount of Each Disbursement this Period 500.00 [MEMO ITEM] Earmarked by Vincent Schmitz

<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:	Transaction ID: X7A17122600EDBC9F0F Date of Disbursement 07 / 28 / 2010
	Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Laurie McInerney

<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle Mailing Address PO Box 33058 City Reno State NV Zip Code 89533 Purpose of Disbursement Transmitted by PAC Check Candidate Name Sharron Angle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:	Transaction ID: 565C6440F29364E7466 Date of Disbursement 07 / 28 / 2010
	Amount of Each Disbursement this Period 610.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>610.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sharron Angle <hr/> Mailing Address PO Box 33058 <hr/> City Reno State NV Zip Code 89533 <hr/> Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Sharron Angle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BB1D42A4F8619007B43 Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2010
	Amount of Each Disbursement this Period 100.00
	<b>[MEMO ITEM]</b> Earmarked by Phillip Cuccia
	Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Jane Norton for Colorado Inc <hr/> Mailing Address 8006 East Arapahoe Road Suite 150 <hr/> City Centennial State CO Zip Code 80112 <hr/> Purpose of Disbursement PAC Check Candidate Name Jane Norton <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X9A12D87AD675557ABA Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2010
	Amount of Each Disbursement this Period 50.00
	Earmarked by Linda Yanez
	Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Jane Norton for Colorado Inc <hr/> Mailing Address 8006 East Arapahoe Road Suite 150 <hr/> City Centennial State CO Zip Code 80112 <hr/> Purpose of Disbursement PAC Check Candidate Name Jane Norton <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X8E1EDAF25F8A7D487B Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2010
	Amount of Each Disbursement this Period 10.00
	Earmarked by Barbara Laco-ur
	Category/Type 011

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

60.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Jane Norton for Colorado Inc</p> <p>Mailing Address 8006 East Arapahoe Road Suite 150</p> <p>City Centennial State CO Zip Code 80112</p> <p>Purpose of Disbursement PAC Check</p> <p>Candidate Name Jane Norton</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:</p>	<p>Transaction ID: X2E432B90B6BF668BF9</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Earmarked by Karen Kline</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Jane Norton for Colorado Inc</p> <p>Mailing Address 8006 East Arapahoe Road Suite 150</p> <p>City Centennial State CO Zip Code 80112</p> <p>Purpose of Disbursement PAC Check</p> <p>Candidate Name Jane Norton</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:</p>	<p>Transaction ID: X3F6891A341D96F262A</p> <p>Date of Disbursement 07 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Earmarked by John E. Dollinger</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Jennifer Horn for Congress</p> <p>Mailing Address 379 Amherst St Pmb 109</p> <p>City Nashua State NH Zip Code 03063</p> <p>Purpose of Disbursement PAC Check</p> <p>Candidate Name Jennifer Horn</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02</p>	<p>Transaction ID: XE0E34EC17256F25D4A</p> <p>Date of Disbursement 07 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Earmarked by Barbara Laco-ur</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

70.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jennifer Horn for Congress</p> <p>Mailing Address 379 Amherst St Pmb 109</p> <p>City Nashua State NH Zip Code 03063</p> <p>Purpose of Disbursement PAC Check</p> <p>Candidate Name Jennifer Horn</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X1AE7C844676B594126</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>011 Category/ Type</p> <p>Earmarked by Karen Kline</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Kinzinger for Congress</p> <p>Mailing Address PO Box 1050</p> <p>City Bourbonnais State IL Zip Code 60914</p> <p>Purpose of Disbursement PAC Check</p> <p>Candidate Name Adam Kinzinger</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XFD8060805DD4FD5F94</p> <p>Date of Disbursement 07 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p>011 Category/ Type</p> <p>Earmarked by Barbara Laco-ur</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kinzinger for Congress</p> <p>Mailing Address PO Box 1050</p> <p>City Bourbonnais State IL Zip Code 60914</p> <p>Purpose of Disbursement PAC Check</p> <p>Candidate Name Adam Kinzinger</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X10B5E0C28404A67E2A</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p>011 Category/ Type</p> <p>Earmarked by Jhony Acosta</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

65.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Kinzinger for Congress	Transaction ID: X7905DD3AF154CAFC6A
	Mailing Address PO Box 1050	Date of Disbursement 07 / 16 / 2010
	City Bourbonnais State IL Zip Code 60914	Amount of Each Disbursement this Period 10.00
	Purpose of Disbursement PAC Check Candidate Name Adam Kinzinger	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Earmarked by Karen Kline

B.	Full Name (Last, First, Middle Initial) Kinzinger for Congress	Transaction ID: X2FEDC08FCBB1EA43B1
	Mailing Address PO Box 1050	Date of Disbursement 07 / 28 / 2010
	City Bourbonnais State IL Zip Code 60914	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement PAC Check Candidate Name Adam Kinzinger	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Earmarked by Delores Ryan

C.	Full Name (Last, First, Middle Initial) Many Individual Conservatives Helping Elect Leaders Everywhere (MICHELEPAC)	Transaction ID: F6156DB034DF768046C
	Mailing Address PO Box 251190	Date of Disbursement 07 / 16 / 2010
	City Woodbury State MN Zip Code 55125	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Candidate Name Many Individual Conservatives Helping Elect Leaders Everywhere (MICHELEPAC)	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
		Contribution

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5060.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Robin Smith for Tennessee  Mailing Address 6231 Perimeter Drive Suite 113  City Chattanooga State TN Zip Code 37421  Purpose of Disbursement PAC Check Candidate Name Robin Tucker Smith  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 03  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XAD5F40CF066C2BB796 Date of Disbursement 07 / 13 / 2010
	Amount of Each Disbursement this Period 10.00  Earmarked by Barbara Lacour
<b>B.</b> Full Name (Last, First, Middle Initial) Robin Smith for Tennessee  Mailing Address 6231 Perimeter Drive Suite 113  City Chattanooga State TN Zip Code 37421  Purpose of Disbursement PAC Check Candidate Name Robin Tucker Smith  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 03  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X6EB9531D0EA272AA8D Date of Disbursement 07 / 16 / 2010
	Amount of Each Disbursement this Period 10.00  Earmarked by Karen Kline
<b>C.</b> Full Name (Last, First, Middle Initial) Ros-Lehtinen for Congress  Mailing Address PO Box 522784  City Miami State FL Zip Code 33152  Purpose of Disbursement PAC Check Candidate Name Ileana Ros-Lehtinen  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: XCEF500052143126C1A Date of Disbursement 07 / 28 / 2010
	Amount of Each Disbursement this Period 20.00  Earmarked by Norma Llorca

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

40.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sue Myrick for Congress</p> <p>Mailing Address PO Box 37091</p> <p>City Charlotte State NC Zip Code 28237</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sue Wilkins Myrick</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X8B32E9DF36ADB4AF0A <b>Date of Disbursement:</b> 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Barbara Lacour</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sue Myrick for Congress</p> <p>Mailing Address PO Box 37091</p> <p>City Charlotte State NC Zip Code 28237</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sue Wilkins Myrick</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> X8E8DCF8404E06AC93E <b>Date of Disbursement:</b> 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 35.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Louise Meehan</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sue Myrick for Congress</p> <p>Mailing Address PO Box 37091</p> <p>City Charlotte State NC Zip Code 28237</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Sue Wilkins Myrick</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> XCB14F4BAE88CFB5498 <b>Date of Disbursement:</b> 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Earmarked by Bettina Nolan</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Sue Myrick for Congress <hr/> Mailing Address PO Box 37091 <hr/> City Charlotte State NC Zip Code 28237 <hr/> Purpose of Disbursement 2010 General, earmarked 7/3 Candidate Name Sue Wilkins Myrick <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BA13E04FB4395E250A4 Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2010
	Amount of Each Disbursement this Period 65.00
	Category/ Type 011
	Earmarked by Karen Kline
<b>B.</b> Full Name (Last, First, Middle Initial) Sue Myrick for Congress <hr/> Mailing Address PO Box 37091 <hr/> City Charlotte State NC Zip Code 28237 <hr/> Purpose of Disbursement PAC Check Candidate Name Sue Wilkins Myrick <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X32A5B812A49D7F8C47 Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2010
	Amount of Each Disbursement this Period 10.00
	Category/ Type 011
	Earmarked by John E. Dollinger
<b>C.</b> Full Name (Last, First, Middle Initial) Sue Myrick for Congress <hr/> Mailing Address PO Box 37091 <hr/> City Charlotte State NC Zip Code 28237 <hr/> Purpose of Disbursement PAC Check Candidate Name Sue Wilkins Myrick <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: X97F3619FA2898324D7 Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2010
	Amount of Each Disbursement this Period 50.00
	Category/ Type 011
	Earmarked by John E. Dollinger

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

125.00

**TOTAL** This Period (last page this line number only) ..... ▶

27253.62