

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

SECRETARY OF THE SENATE  
10 OCT 15 PM 5:34  
Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

CARLY VICTORY COMMITTEE

ADDRESS (number and street) PO BOX 365

Check if different than previously reported. (ACC) MCLEAN VA 22101

2. FEC IDENTIFICATION NUMBER **C00471649** CITY STATE ZIP CODE

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:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day Post-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2010 through 09 30 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 \_\_\_\_\_

Signature of Treasurer Electro *Carroll Hanks* Date 10 15 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)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

2 / 582

Write or Type Committee Name  
**CARLY VICTORY COMMITTEE**

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y	Y
2	0	1	0	

 To: 

M	M
0	9

D	D
3	0

Y	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" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><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><td></td></tr></table>	Y	Y	Y	Y	Y	2	0	1	0			0.00
Y	Y	Y	Y	Y								
2	0	1	0									
(b) Cash on Hand at Beginning of Reporting Period .....	28708.36											
(c) Total Receipts (from Line 19) .....	4090841.55	4224941.55										
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	4119549.91	4224941.55										
7. Total Disbursements (from Line 31) .....	3061522.13	3166913.77										
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1058027.78	1058027.78										
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

11 10 09 08 07 06 05 04 03 02 01

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name  
**CARLY VICTORY COMMITTEE**

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	W	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	W	Y
2	0	1	0

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	3916277.45	4047977.45
(i) Itemized (use Schedule A) .....	32142.00	32142.00
(ii) Unitemized .....	3948419.45	4080119.45
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	0.00	0.00
(b) Political Party Committees .....	140917.00	140917.00
(c) Other Political Committees (such as PACs) .....	4089336.45	4221036.45
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	2400.00
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) .....	1505.10	1505.10
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)) .....	4090841.55	4224941.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4090841.55	4224941.55

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**DETAILED SUMMARY PAGE**

of Disbursements

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FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>		<b>COLUMN A</b>	<b>COLUMN B</b>
		<b>Total This Period</b>	<b>Calendar Year-to-Date</b>
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....		0.00	0.00
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		514522.13	526913.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶		514522.13	526913.77
22. Transfers to Affiliated/Other Party Committees.....		2547000.00	2640000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		0.00	0.00
24. Independent Expenditure (use Schedule E).....		0.00	0.00
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	0.00
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))..		3061522.13	3166913.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		3061522.13	3166913.77

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**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) .....	4089336.45	4221036.45
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4089336.45	4221036.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	514522.13	526913.77
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1505.10	1505.10
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	513017.03	525408.67

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

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

FOR LINE NUMBER: PAGE 6 / 582  
(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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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)  
CARLY VICTORY COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
MS. GINGER ACKERLEY

Mailing Address 99 UNION STREET  
UNIT 1402

City SEATTLE State WA Zip Code 98101-5007

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 ▼ 10000.00

Date of Receipt MM / DD / YYYY  
09 / 24 / 2010

Transaction ID: SA11.48331

Amount of Each Receipt this Period 10000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. AARON JAY ADAIR

Mailing Address 2825 MANKAS CORNER ROAD

City FAIRFIELD State CA Zip Code 94534-3141

FEC ID number of contributing federal political committee. C

Name of Employer COPART Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt MM / DD / YYYY  
09 / 24 / 2010

Transaction ID: SA11.48314

Amount of Each Receipt this Period 30400.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MRS. TAMMI L. ADAIR

Mailing Address 2825 MANKAS CORNER ROAD

City FAIRFIELD State CA Zip Code 94534-3141

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 ▼ 5070.00

Date of Receipt MM / DD / YYYY  
09 / 20 / 2010

Transaction ID: SA11.59664

Amount of Each Receipt this Period 5070.00

CONTRIBUTION

IN-KIND: FOOD AND BEVERAGE

SUBTOTAL of Receipts This Page (optional) ..... ▶ 45470.00

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

13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 582 (check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. GEORGE ADAMS</b>		Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
Mailing Address <b>462 N. CARLISLE</b>		Transaction ID: <b>SA11.38949</b>
City <b>ORANGE</b>	State <b>CA</b>	Zip Code <b>92869-6020</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1666.67</b>
Name of Employer <b>S&amp;A RECYCLING</b>	Occupation <b>PRESIDENT</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1666.67</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL J. ADAMS</b>		Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
Mailing Address <b>5080 E. COPA DE ORO</b>		Transaction ID: <b>SA11.38950</b>
City <b>ANAHEIM</b>	State <b>CA</b>	Zip Code <b>92807-3638</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1666.67</b>
Name of Employer <b>S&amp;A RECYCLING</b>	Occupation <b>VICE PRESIDENT</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1666.67</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. TERRY SCOTT ADAMS</b>		Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
Mailing Address <b>18560 MARTINIQUE COURT</b>		Transaction ID: <b>SA11.38959</b>
City <b>VILLA PARK</b>	State <b>CA</b>	Zip Code <b>92861-3122</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1666.66</b>
Name of Employer <b>S&amp;A RECYCLING</b>	Occupation <b>ENGINEER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1666.66</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 8 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
MR. MITCH ADLER

Mailing Address 7831 OSTROW STREET

City SAN DIEGO State CA Zip Code 92111-3602

FEC ID number of contributing federal political committee. C

Name of Employer BONDED CARPET Occupation CLEANING, SALES & SERVICES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date 500.00

Date of Receipt 09 / 30 / 2010

Transaction ID: SA11.58751

Amount of Each Receipt this Period 500.00

CONTRIBUTION

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

Mailing Address 1179 WAGNER PLACE

City SAINT LOUIS State MO Zip Code 63119-1148

FEC ID number of contributing federal political committee. C

Name of Employer THE MINE SUPPLY COMPANY Occupation PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date 750.00

Date of Receipt 09 / 29 / 2010

Transaction ID: SA11.50616

Amount of Each Receipt this Period 750.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. GREGG ALAN AGENS

Mailing Address 3450 DEER RIDGE DRIVE

City DANVILLE State CA Zip Code 94506-6049

FEC ID number of contributing federal political committee. C

Name of Employer PRICEWATERHOUSECOOPERS L.-L.C. Occupation PUBLIC ACCOUNTING

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date 2400.00

Date of Receipt 09 / 16 / 2010

Transaction ID: SA11.42688

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 3650.00

TOTAL This Period (last page this line number only)

1002073471

**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 9 / 582
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MR. DAVID M. AHEARN, III		Date of Receipt MM / DD / YYYY 09 / 15 / 2010
Mailing Address 14420 CLUBHOUSE ROAD		Transaction ID: SA11.40341
City	State	Zip Code
GAINESVILLE	VA	20155-3816
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer BLUE STONE LOGIC		Occupation FOUNDING PARTNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial) MR. JOSEPH AIELLO		Date of Receipt MM / DD / YYYY 09 / 02 / 2010
Mailing Address 1020 STATE HIGHWAY 25		Transaction ID: SA11.33518
City	State	Zip Code
GILROY	CA	95020-8074
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
Name of Employer UESUGI FARMS, INC.		Occupation OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2400.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial) MR. JOSEPH HARRY AKERMAN		Date of Receipt MM / DD / YYYY 08 / 31 / 2010
Mailing Address 418 ALBION AVENUE		Transaction ID: SA11.29704
City	State	Zip Code
WOODSIDE	CA	94062-3604
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer SELF-EMPLOYED		Occupation INVESTMENTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) .....	4900.00
TOTAL This Period (last page this line number only) .....	

10020734372

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

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

FOR LINE NUMBER: PAGE 10 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) MS. PENELYN S. ALEXANDER	Date of Receipt MM / DD / YYYY 08 / 26 / 2010
	Mailing Address 1905 PARKSIDE AVENUE	Transaction ID: SA11.29486
	City Hillsborough State CA Zip Code 94010-6449	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer FRANKLIN RESOURCES Occupation SENIOR VICE PRESIDENT HUMAN RESOURCES	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date 500.00
<b>B.</b>	Full Name (Last, First, Middle Initial) MR. BARRY J. ALEXIN	Date of Receipt MM / DD / YYYY 09 / 27 / 2010
	Mailing Address 400 TRACY LANE APARTMENT 7	Transaction ID: SA11.49414
	City ST. CLAIRSVILLE State OH Zip Code 43950-1052	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer MURRAY ENERGY CORPORATION Occupation ASSISTANT VICE PRESIDENT, ENGINEERING	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date 300.00
<b>C.</b>	Full Name (Last, First, Middle Initial) MR. KENFIELD L. ALLDRIN	Date of Receipt MM / DD / YYYY 09 / 24 / 2010
	Mailing Address 1405 RIVER OAKS DRIVE	Transaction ID: SA11.48343
	City MODESTO State CA Zip Code 95356-9685	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer MONT PEILER NUT COMPANY Occupation FARMER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date 10000.00
SUBTOTAL of Receipts This Page (optional) .....		10800.00
TOTAL This Period (last page this line number only) .....		

10020734373

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

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

FOR LINE NUMBER: PAGE 11 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MR. JOHN M. ALLEN</b>	Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
	Mailing Address <b>9301 SHAFTER ROAD</b>	Transaction ID: <b>SA11.29743</b>
	City <b>BAKERSFIELD</b> State <b>CA</b> Zip Code <b>93311-9766</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>JOHN ALLEN FARMS, INC.</b> Occupation <b>FARMER</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MRS. ANN M. ALLRED</b>	Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
	Mailing Address <b>11452 EL CAMINO REAL SUITE 200</b>	Transaction ID: <b>SA11.47350</b>
	City <b>SAN DIEGO</b> State <b>CA</b> Zip Code <b>92130-2080</b>	Amount of Each Receipt this Period <b>1900.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	Aggregate Year-to-Date <b>1900.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. DAVID F. ALLRED</b>	Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
	Mailing Address <b>11512 EL CAMINO REAL SUITE 100</b>	Transaction ID: <b>SA11.47352</b>
	City <b>SAN DIEGO</b> State <b>CA</b> Zip Code <b>92130-2087</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>REAL ESTATE DEVELOPER</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<b>2900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

10020734374

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

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

FOR LINE NUMBER: PAGE 12 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. DOUGLAS O. ALLRED</b>		Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
Mailing Address <b>11452 EL CAMINO REAL SUITE 200</b>		Transaction ID: <b>SA11.47351</b>
City <b>SAN DIEGO</b>	State <b>CA</b>	Zip Code <b>92130-2080</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1900.00</b>
Name of Employer <b>DOUGLAS ALLRED COMPANY</b>	Occupation <b>PRESIDENT/C.E.O.</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1900.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MS. LUE J. ALLRED</b>		Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
Mailing Address <b>P.O. BOX 2848</b>		Transaction ID: <b>SA11.38951</b>
City <b>NEWPORT BEACH</b>	State <b>CA</b>	Zip Code <b>92659-1048</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>HISTORIAN/WRITER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>ZILMA M. ALLRED</b>		Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>19 SAN SEBASTIAN</b>		Transaction ID: <b>SA11.29710</b>
City <b>NEWPORT BEACH</b>	State <b>CA</b>	Zip Code <b>92660-6828</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>10000.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>EXECUTIVE</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>10000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>12150.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734375



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

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

FOR LINE NUMBER: PAGE 13 / 582

(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)  
CARLY VICTORY COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
MR. BYRON ALLUMBAUGH

Mailing Address 33 RIDGELINE DRIVE

City State Zip Code  
NEWPORT BEACH CA 92660-6838

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 ▼ 2400.00

Date of Receipt MM / DD / YYYY  
09 / 15 / 2010

Transaction ID: SA11.40478

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. LEONARD ALMALEECH

Mailing Address 20875 SARATOGA HILLS ROAD

City State Zip Code  
SARATOGA CA 95070-5383

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

Name of Employer Occupation  
ENTERPRISE HOLDINGS, S.F. VICE PRESIDENT/GENERAL MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt MM / DD / YYYY  
08 / 24 / 2010

Transaction ID: SA11.28190

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MS. KATHERINE M. ALMY

Mailing Address 508 SANTA ANITA COURT

City State Zip Code  
SIERRA MADRE CA 91024-2623

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS C.E.O.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58945

Amount of Each Receipt this Period 350.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 5150.00

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

10020734379

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

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

FOR LINE NUMBER: PAGE 14 / 582

(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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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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. RICKI ALON Mailing Address 27673 LUPINE ROAD City LOS ALTOS HILLS State CA Zip Code 94022-2468 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2010 Transaction ID: SA11.49267 Amount of Each Receipt this Period 500.00 CONTRIBUTION
Name of Employer ALON VENTURES Occupation INVESTMENTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) MRS. ZVI ALON Mailing Address 27673 LUPINE ROAD City LOS ALTOS HILLS State CA Zip Code 94022-2468 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2010 Transaction ID: SA11.49280 Amount of Each Receipt this Period 500.00 CONTRIBUTION
Name of Employer ALON VENTURES Occupation INVESTMENTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) MR. ROBERT A. ALTER Mailing Address BOX 1500-4240 City CORONA DEL MAR State CA Zip Code 92625 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 23 / 2010 Transaction ID: SA11.47334 Amount of Each Receipt this Period 500.00 CONTRIBUTION
Name of Employer SUNSTONE HOTEL INVESTORS INC. Occupation CHAIRMAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

10020734377

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

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

FOR LINE NUMBER: PAGE 15 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MR. JOSEPH C. AMATURO

Mailing Address 3101 N. FEDERAL HWY #601

City State Zip Code  
**FORT LAUDERDALE FL 33306-1018**

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

Name of Employer Occupation  
**THE AMATURO GROUP BUSINESS OWNER**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: SA11.50728

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. KENNETH AMBROSE

Mailing Address 3697 MT. DIABLO BLVD. #250

City State Zip Code  
**LAFAYETTE CA 94549-3745**

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

Name of Employer Occupation  
**AMBROSE CORPORATION CONSULTANT**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 13 / 2010**

Transaction ID: SA11.39354

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. GILBERT F. AMELIO

Mailing Address 2821 SETTING SUN DRIVE

City State Zip Code  
**CORONA DEL MAR CA 92625-1520**

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 ▼ **500.00**

Date of Receipt **09 / 23 / 2010**

Transaction ID: SA11.47384

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2500.00**

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

100207343788

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

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

FOR LINE NUMBER: PAGE 16 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MS. BETTY ANDERSON**

Mailing Address **3740 W. CALDWELL AVENUE**

City **VISALIA** State **CA** Zip Code **93277-9282**

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

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt **MM / DD / YYYY**  
**09 / 01 / 2010**

Transaction ID: **SA11.30353**

Amount of Each Receipt this Period  
**1200.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MS. BETH ANDERSEN**

Mailing Address **3330 VAUGHN ROAD**

City **LAFAYETTE** State **CA** Zip Code **94549-1950**

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

Name of Employer **AETNA** Occupation **PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **MM / DD / YYYY**  
**09 / 16 / 2010**

Transaction ID: **SA11.42733**

Amount of Each Receipt this Period  
**2500.00**

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**H. P. ANDERSON**

Mailing Address **3740 W. CALDWELL AVENUE**

City **VISALIA** State **CA** Zip Code **93277-9282**

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

Name of Employer **CORKY ANDERSON FARMS** Occupation **FARMER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt **MM / DD / YYYY**  
**09 / 01 / 2010**

Transaction ID: **SA11.30378**

Amount of Each Receipt this Period  
**1200.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **4900.00**

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

10020734379



**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 18 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MR. GORDON P. ANDREWS	Date of Receipt MM / DD / YYYY 09 / 10 / 2010
Mailing Address P.O. BOX 2027	Transaction ID: SA11.38933
City State Zip Code SAN ANSELMO CA 94979-2027	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

**B.**

Full Name (Last, First, Middle Initial) MR. JOHN ANDREINI	Date of Receipt MM / DD / YYYY 09 / 03 / 2010
Mailing Address 220 W. 20TH AVENUE	Transaction ID: SA11.33555
City State Zip Code SAN MATEO CA 94403-1339	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer ANDREINI & COMPANY Occupation INSURANCE BROKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00

**C.**

Full Name (Last, First, Middle Initial) MR. JOHN ANDREINI	Date of Receipt MM / DD / YYYY 09 / 03 / 2010
Mailing Address 220 W. 20TH AVENUE	Transaction ID: SA11.33556
City State Zip Code SAN MATEO CA 94403-1339	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer ANDREINI & COMPANY Occupation INSURANCE BROKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00

SUBTOTAL of Receipts This Page (optional) .....	2500.00
TOTAL This Period (last page this line number only) .....	

11  
12  
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**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 19 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KEVIN S. ANDREW**

Mailing Address **7400 CALLE SAGRADA**

City **BAKERSFIELD** State **CA** Zip Code **93309-0803**

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

Name of Employer **SUN WORLD INTERNATIONAL** Occupation **SENIOR VICE PRESIDENT**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 09 / 2010**  
**Transaction ID: SA11.38702**  
 Amount of Each Receipt this Period **500.00**  
**CONTRIBUTION**

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

Mailing Address **7400 CALLE SAGRADA**

City **BAKERSFIELD** State **CA** Zip Code **93309-0803**

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 ▼ **500.00**

Date of Receipt **09 / 09 / 2010**  
**Transaction ID: SA11.38696**  
 Amount of Each Receipt this Period **500.00**  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. KEITH J. ANGEL**

Mailing Address **7456 LATIGO DRIVE**

City **HUNTINGTON BEACH** State **CA** Zip Code **92648-6845**

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

Name of Employer **ANGEL/COTTON ASSOCIATES** Occupation **SALES**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 21 / 2010**  
**Transaction ID: SA11.44109**  
 Amount of Each Receipt this Period **500.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1500.00**

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

1002073432

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 582 (check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. KIM ANGLE

Mailing Address 5288 DERBY HILL POINT

City State Zip Code  
SAN DIEGO CA 92130-4882

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS  
Occupation RESPIRATORY THERAPIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58726

Amount of Each Receipt this Period  
1200.00

CONTRIBUTION

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

Mailing Address 5288 DERBY HILL POINT

City State Zip Code  
SAN DIEGO CA 92130-4882

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

Name of Employer NAVAL MEDICAL CENTER  
Occupation VASCULAR SURGEON

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58741

Amount of Each Receipt this Period  
1200.00

CONTRIBUTION

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

Mailing Address 1823 TERRACE PLACE

City State Zip Code  
DELANO CA 93215-1454

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

Name of Employer LES SANDRINI FARMS  
Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: SA11.38758

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 2900.00

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

11  
12  
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**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 21 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. BEN ANIXTER</b>		Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>
Mailing Address <b>145 STONEPINE ROAD</b>		Transaction ID: <b>SA11.27582</b>
City <b>HILLSBOROUGH</b>	State <b>CA</b>	Zip Code <b>94010-6573</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. BEN ANIXTER</b>		Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>145 STONEPINE ROAD</b>		Transaction ID: <b>SA11.39360</b>
City <b>HILLSBOROUGH</b>	State <b>CA</b>	Zip Code <b>94010-6573</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. PATRICIA ANIXTER</b>		Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>
Mailing Address <b>145 STONEPINE ROAD</b>		Transaction ID: <b>SA11.27580</b>
City <b>HILLSBOROUGH</b>	State <b>CA</b>	Zip Code <b>94010-6573</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073434

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

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

FOR LINE NUMBER: PAGE 22 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) MRS. PATRICIA ANIXTER	Date of Receipt MM / DD / YYYY 09 / 13 / 2010
	Mailing Address 145 STONEPINE ROAD	Transaction ID: SA11.39348
	City HillsBOROUGH State CA Zip Code 94010-6573	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer RETIRED Occupation RETIRED	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b>	Full Name (Last, First, Middle Initial) MRS. CHERIE P. ARKLEY	Date of Receipt MM / DD / YYYY 09 / 21 / 2010
	Mailing Address 323 5TH STREET	Transaction ID: SA11.44122
	City EUREKA State CA Zip Code 95501-0305	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer HOMEMAKER Occupation HOMEMAKER	Aggregate Year-to-Date 1200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b>	Full Name (Last, First, Middle Initial) MR. ROBIN P. ARKLEY, II	Date of Receipt MM / DD / YYYY 09 / 21 / 2010
	Mailing Address 323 5TH STREET	Transaction ID: SA11.44137
	City EUREKA State CA Zip Code 95501-0305	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer S.N. SERVICING CORPORATION Occupation PRESIDENT	Aggregate Year-to-Date 1200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		2650.00
<b>TOTAL</b> This Period (last page this line number only) .....		

1302073433

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

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

FOR LINE NUMBER: PAGE 23 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MRS. MARY JANE ARMACOST</b>	Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
	Mailing Address <b>720 EUCALYPTUS AVENUE</b>	<b>Transaction ID: SA11.38983</b>
	City <b>HILLSBOROUGH</b> State <b>CA</b> Zip Code <b>94010-6315</b>	Amount of Each Receipt this Period <b>1000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MR. SAMUEL H. ARMACOST</b>	Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
	Mailing Address <b>720 EUCALYPTUS AVENUE</b>	<b>Transaction ID: SA11.38991</b>
	City <b>HILLSBOROUGH</b> State <b>CA</b> Zip Code <b>94010-6315</b>	Amount of Each Receipt this Period <b>1000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. HOWARD ARNAIZ</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
	Mailing Address <b>P.O. BOX 1107</b>	<b>Transaction ID: SA11.33450</b>
	City <b>PEBBLE BEACH</b> State <b>CA</b> Zip Code <b>93953-1107</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>3600.00</b>
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<b>4400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

1002073431

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

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

FOR LINE NUMBER: PAGE 24 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. HOWARD ARNAIZ**

Mailing Address **P.O. BOX 1107**

City **PEBBLE BEACH** State **CA** Zip Code **93953-1107**

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 ▼ **3600.00**

Date of Receipt **09 / 02 / 2010**

Transaction ID: **SA11.33455**

Amount of Each Receipt this Period **1200.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MRS. LACEY ARNAIZ**

Mailing Address **P.O. BOX 1107**

City **PEBBLE BEACH** State **CA** Zip Code **93953-1107**

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

Name of Employer **H.D. ARNAIZ CORPORATION** Occupation **PUBLIC AFFAIRS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt **09 / 02 / 2010**

Transaction ID: **SA11.33460**

Amount of Each Receipt this Period **1200.00**

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**MR. ROBERT D. ARNOTT**

Mailing Address **620 NEWPORT CENTER DRIVE #900**

City **NEWPORT BEACH** State **CA** Zip Code **92660-8038**

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

Name of Employer **RESEARCH AFFILIATES** Occupation **CHAIRMAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2900.00**

Date of Receipt **09 / 23 / 2010**

Transaction ID: **SA11.47342**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2900.00**

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

10020734337

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

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

FOR LINE NUMBER: PAGE 25 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MR. ROBERT D. ARNOTT</b>	Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
	Mailing Address <b>620 NEWPORT CENTER DRIVE #900</b>	Transaction ID: <b>SA11.58724</b>
	City <b>NEWPORT BEACH</b> State <b>CA</b> Zip Code <b>92660-8038</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RESEARCH AFFILIATES</b> Occupation <b>CHAIRMAN</b>	Aggregate Year-to-Date <b>2900.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MR. DARIUS ASSEMI</b>	Date of Receipt MM / DD / YYYY <b>09 / 08 / 2010</b>
	Mailing Address <b>1396 W. HERNDON AVENUE SUITE 101</b>	Transaction ID: <b>SA11.36385</b>
	City <b>FRESNO</b> State <b>CA</b> Zip Code <b>93711-7126</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>GRANVILLE HOMES INC.</b> Occupation <b>HOME BUILDER</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. RONALD W. ATCHLEY</b>	Date of Receipt MM / DD / YYYY <b>09 / 08 / 2010</b>
	Mailing Address <b>1828 OAKS WAY</b>	Transaction ID: <b>SA11.36395</b>
	City <b>OKLAHOMA CITY</b> State <b>OK</b> Zip Code <b>73131-1271</b>	Amount of Each Receipt this Period <b>400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>ATCHLEY RESOURCES, INC.</b> Occupation <b>ENGINEER</b>	Aggregate Year-to-Date <b>400.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<b>3300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

1002073433

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 582 (check only one)
<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. JAMES MARK ATLAS</b>	Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
Mailing Address <b>332 WEST SYCAMORE STREET</b>	Transaction ID: <b>SA11.38732</b>
City <b>WILLOWS</b> State <b>CA</b> Zip Code <b>95988-2830</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>ATTORNEY</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>REGAN AVERY</b>	Date of Receipt MM / DD / YYYY <b>09 / 20 / 2010</b>
Mailing Address <b>20 EUGENIA LANE</b>	Transaction ID: <b>SA11.43573</b>
City <b>WOODSIDE</b> State <b>CA</b> Zip Code <b>94062-1197</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>ACCO MANAGEMENT</b> Occupation <b>REAL ESTATE EXECUTIVE</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. AMIE L. STONE AZEVEDO</b>	Date of Receipt MM / DD / YYYY <b>09 / 03 / 2010</b>
Mailing Address <b>527 B. STREET</b>	Transaction ID: <b>SA11.33570</b>
City <b>LEMOORE</b> State <b>CA</b> Zip Code <b>93245-2605</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b> Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002074433

**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 27 / 582
<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MRS. LAURA BACON</b>		Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
Mailing Address <b>290 PENNY LANE</b>		Transaction ID: <b>SA11.38928</b>
City <b>SANTA BARBARA</b>	State <b>CA</b>	Zip Code <b>93108-2666</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. GORDON GORDON BAGNE, JR.</b>		Date of Receipt MM / DD / YYYY <b>08 / 11 / 2010</b>
Mailing Address <b>801 S. ACACIA</b>		Transaction ID: <b>SA11.26280</b>
City <b>FULLERTON</b>	State <b>CA</b>	Zip Code <b>92831-5305</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>PLASTICOLOR INC.</b>	Occupation <b>OWNER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>HARINDER S. BAINS</b>		Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
Mailing Address <b>3628 CARLSON ROAD</b>		Transaction ID: <b>SA11.38981</b>
City <b>YUBA CITY</b>	State <b>CA</b>	Zip Code <b>95993-9502</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>SIERRA VALLEY INSURANCE</b>	Occupation <b>FARMER/SALES AGENT</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734300

**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 28 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>GAURDIE E. BANISTER</b>	Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
Mailing Address <b>2606 EAGLE CREST DRIVE</b>	Transaction ID: <b>SA11.38694</b>
City <b>BAKERSFIELD</b> State <b>CA</b> Zip Code <b>93311-2942</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>AERA ENERGY</b> Occupation <b>CEO</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. LOUIS BARBICH</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>3801 CLAREMONT STREET</b>	Transaction ID: <b>SA11.50862</b>
City <b>BAKERSFIELD</b> State <b>CA</b> Zip Code <b>93306-3625</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>BARBICH HOOPER KING DILL HOFFMAN</b> Occupation <b>C.P.A.</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. SHERYL BARBICH</b>	Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>3801 CLAREMONT STREET</b>	Transaction ID: <b>SA11.29742</b>
City <b>BAKERSFIELD</b> State <b>CA</b> Zip Code <b>93306-3625</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>BARBICH CONSULTING</b> Occupation <b>CONSULTANT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734301



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

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

FOR LINE NUMBER: PAGE 29 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. SHERYL BARBICH		Date of Receipt MM / DD / YYYY 09 / 29 / 2010	
Mailing Address 3801 CLAREMONT STREET		Transaction ID: SA11.50872	
City BAKERSFIELD	State CA	Zip Code 93306-3625	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer BARBICH CONSULTING	Occupation CONSULTANT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) MR. THOMAS BARCELLOS		Date of Receipt MM / DD / YYYY 09 / 09 / 2010	
Mailing Address 14851 ROAD 168		Transaction ID: SA11.36448	
City PORTERVILLE	State CA	Zip Code 93257-9203	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer BARCELLOS FARMS	Occupation DAIRYMAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) MR. LOUIS H. BARNETT		Date of Receipt MM / DD / YYYY 09 / 23 / 2010	
Mailing Address 408 STATEN AVENUE		Transaction ID: SA11.47354	
City OAKLAND	State CA	Zip Code 94610-4927	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
SUBTOTAL of Receipts This Page (optional) ..... ▶		2500.00	
TOTAL This Period (last page this line number only) ..... ▶		_____	

10020734332

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

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

FOR LINE NUMBER: PAGE 30 / 582

(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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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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. DOUGLAS BARNHART</b>		Date of Receipt MM / DD / YYYY <b>08 / 24 / 2010</b>
Mailing Address <b>P.O. BOX 5000-221</b>		Transaction ID: <b>SA11.28197</b>
City <b>RANCHO SANTA FE</b>	State <b>CA</b>	Zip Code <b>92067</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>30400.00</b>	
Name of Employer <b>MCKENNA CONSULTING</b>	Occupation <b>C.E.O.</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>30400.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. JAMES H. BARNICK</b>		Date of Receipt MM / DD / YYYY <b>09 / 22 / 2010</b>
Mailing Address <b>4132 COPPER CREEK DRIVE</b>		Transaction ID: <b>SA11.45277</b>
City <b>MODESTO</b>	State <b>CA</b>	Zip Code <b>95355-8965</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>MCCOY TRUCKTIRE</b>	Occupation <b>BUSINESS OWNER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. JIMMY R. BARRIER</b>		Date of Receipt MM / DD / YYYY <b>09 / 24 / 2010</b>
Mailing Address <b>1533 120TH AVENUE NE</b>		Transaction ID: <b>SA11.48290</b>
City <b>BELLEVUE</b>	State <b>WA</b>	Zip Code <b>98005-2131</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>BARRIER MOTORS</b>	Occupation <b>OWNER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>32400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073433

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 582 (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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MR. JOHN E. BARRUS	Date of Receipt MM / DD / YYYY 09 / 03 / 2010
Mailing Address 1670 BEVERLY AVENUE	Transaction ID: SA11.33586
City State Zip Code CLOVIS CA 93611-3041	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation BARRUS & ROBERTS, P.C. ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

**B.**

Full Name (Last, First, Middle Initial) MR. DAVID BARTELS	Date of Receipt MM / DD / YYYY 09 / 10 / 2010
Mailing Address 24671 ASHLAND DRIVE	Transaction ID: SA11.38979
City State Zip Code LAGUNA HILLS CA 92653-4333	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation HOWREY LLP ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

**C.**

Full Name (Last, First, Middle Initial) MR. ANDREW F. BARTH	Date of Receipt MM / DD / YYYY 08 / 26 / 2010
Mailing Address 2200 CHAUCER ROAD	Transaction ID: SA11.29460
City State Zip Code SAN MARINO CA 91108-1314	Amount of Each Receipt this Period 30400.00
FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation CAPITAL GROUP INVESTMENT MANAGEMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30400.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	31150.00
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734334

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

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

FOR LINE NUMBER: PAGE 32 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. BRUCE R. BARTLETT</b>		Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>	
Mailing Address <b>6853 AVENIDA LAS PERLAS P.O. BOX 9714</b>		Transaction ID: <b>SA11.58905</b>	
City <b>RANCHO SANTA FE</b>	State <b>CA</b>	Zip Code <b>92067-4714</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>BARTLETT HOLDINGS</b>	Occupation <b>OWNER</b>	Aggregate Year-to-Date <b>2400.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. SUSANNE BARTOLI</b>		Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>	
Mailing Address <b>18481 CHAPARRAL DRIVE</b>		Transaction ID: <b>SA11.42699</b>	
City <b>PENN VALLEY</b>	State <b>CA</b>	Zip Code <b>95946-9230</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Aggregate Year-to-Date <b>250.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) <b>MS. BARBARA J. BASSI</b>		Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>	
Mailing Address <b>18 CHANNEL VISTA</b>		Transaction ID: <b>SA11.29712</b>	
City <b>NEWPORT COAST</b>	State <b>CA</b>	Zip Code <b>92657-1807</b>	Amount of Each Receipt this Period <b>10000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	Aggregate Year-to-Date <b>10000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>12650.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

13020744

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

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

FOR LINE NUMBER: PAGE 33 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. ERIC J. BASU	Date of Receipt MM / DD / YYYY 09 / 15 / 2010
	Mailing Address 651 ARROYO DRIVE	Transaction ID: SA11.40457
	City State Zip Code SAN DIEGO CA 92103-6401	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SENTEK GLOBAL	Occupation C.E.O.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
<b>B.</b>	Full Name (Last, First, Middle Initial) MR. PAUL BASZUCKI	Date of Receipt MM / DD / YYYY 09 / 02 / 2010
	Mailing Address 519 LOMA ALTA ROAD	Transaction ID: SA11.33483
	City State Zip Code CARMEL CA 93923-9432	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7400.00	
<b>C.</b>	Full Name (Last, First, Middle Initial) MR. PAUL BASZUCKI	Date of Receipt MM / DD / YYYY 09 / 29 / 2010
	Mailing Address 519 LOMA ALTA ROAD	Transaction ID: SA11.50720
	City State Zip Code CARMEL CA 93923-9432	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7400.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		8400.00
<b>TOTAL</b> This Period (last page this line number only) .....		

1002074433

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 582 (check only one)
<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MRS. NANCY W. BATES</b>	Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>
Mailing Address <b>20 BELLEVUE AVENUE</b>	Transaction ID: <b>SA11.42734</b>
City <b>PIEDMONT</b> State <b>CA</b> Zip Code <b>94611-3502</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MS. PATRICIA C. BATES</b>	Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
Mailing Address <b>31631 SEA SHADOWS WAY</b>	Transaction ID: <b>SA11.38952</b>
City <b>LAGUNA NIGUEL</b> State <b>CA</b> Zip Code <b>92677-5433</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>REPUBLICAN PARTY</b> Occupation <b>DISTRICT SUPERVISOR BOARD CHAIR</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. R. ROGER BAUGHAN</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>126 WEST PACES ROAD</b>	Transaction ID: <b>SA11.50620</b>
City <b>MOORESVILLE</b> State <b>NC</b> Zip Code <b>28117-7149</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>THE BAUGHAN GROUP</b> Occupation <b>EXECUTIVE</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734397

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

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

FOR LINE NUMBER: PAGE 35 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. FRANK E. BAXTER		Date of Receipt MM / DD / YYYY 09 / 08 / 2010	
Mailing Address 11100 SANTA MONICA BLVD. 11TH FLOOR		Transaction ID: SA11.36369	
City LOS ANGELES	State CA	Zip Code 90025-3384	Amount of Each Receipt this Period 25000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) MR. JERRY L. BAYLEY		Date of Receipt MM / DD / YYYY 09 / 24 / 2010	
Mailing Address 904 RUGBY LANE		Transaction ID: SA11.48310	
City MODESTO	State CA	Zip Code 95356-1839	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) MRS. VICKI BAYLEY		Date of Receipt MM / DD / YYYY 09 / 24 / 2010	
Mailing Address 904 RUGBY LANE		Transaction ID: SA11.48302	
City MODESTO	State CA	Zip Code 95356-1839	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
SUBTOTAL of Receipts This Page (optional) .....		26000.00	
TOTAL This Period (last page this line number only) .....			

1002074433

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

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

FOR LINE NUMBER: PAGE 36 / 582

(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)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. BARBARA BECHELLI	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 3535 WEBSTER STREET	Transaction ID: SA11.36444
	City State Zip Code SAN FRANCISCO CA 94123-1716	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	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.	Full Name (Last, First, Middle Initial) MR. RICHARD L. BECHELLI	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 3535 WEBSTER STREET	Transaction ID: SA11.36445
	City State Zip Code SAN FRANCISCO CA 94123-1716	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	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
C.	Full Name (Last, First, Middle Initial) MR. ROBERT BECK	Date of Receipt MM / DD / YYYY 09 / 29 / 2010
	Mailing Address P.O. BOX 627	Transaction ID: SA11.50849
	City State Zip Code PEBBLE BEACH CA 93953-0627	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BECK CONSULTING GROUP LLC CONSULTANT	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00
SUBTOTAL of Receipts This Page (optional) .....		2900.00
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 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MS. G. PATRICIA BECKMAN		Date of Receipt MM / DD / YYYY 09 / 10 / 2010	
Mailing Address 107 SHORECLIFF ROAD		Transaction ID: SA11.38953	
City State Zip Code CORONA DEL MAR CA 92625-2646	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	CONTRIBUTION		
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>B.</b> Full Name (Last, First, Middle Initial) WANLYN B. BEJACH		Date of Receipt MM / DD / YYYY 07 / 30 / 2010	
Mailing Address 10582 MIRA VISTA		Transaction ID: SA11.26328	
City State Zip Code NORTH TUSTIN CA 92705-2570	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	CONTRIBUTION		
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 ▼ 1000.00			
<b>C.</b> Full Name (Last, First, Middle Initial) MRS. JANE C. BELLOMY		Date of Receipt MM / DD / YYYY 09 / 30 / 2010	
Mailing Address 5962 KANAN DUME ROAD		Transaction ID: SA11.58978	
City State Zip Code MALIBU CA 90265-4027	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	CONTRIBUTION		
Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 250.00			
SUBTOTAL of Receipts This Page (optional) ..... ▶		1500.00	
TOTAL This Period (last page this line number only) ..... ▶		[Empty Box]	

10020734400

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

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

FOR LINE NUMBER: PAGE 38 / 582

(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)  
CARLY VICTORY COMMITTEE

**A.**

Full Name (Last, First, Middle Initial) MR. PHILIP G. BELLOMY		Date of Receipt MM / DD / YYYY 09 / 30 / 2010	
Mailing Address 5962 KANAN DUME ROAD		Transaction ID: SA11.58947	
City MALIBU	State CA	Zip Code 90265-4027	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer HELMET HOUSE	Occupation OWNER/VICE PRESIDENT	Aggregate Year-to-Date 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) MR. TOM D. BENGARD		Date of Receipt MM / DD / YYYY 09 / 02 / 2010	
Mailing Address 955 OLD STAGE ROAD		Transaction ID: SA11.33519	
City SALINAS	State CA	Zip Code 93908-9799	Amount of Each Receipt this Period 2400.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer SELF-EMPLOYED	Occupation FARMER & RANCHER	Aggregate Year-to-Date 2400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) MR. DOUGLAS BENIK		Date of Receipt MM / DD / YYYY 09 / 08 / 2010	
Mailing Address P.O. BOX 13072		Transaction ID: SA11.36384	
City FRESNO	State CA	Zip Code 93794-3072	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer DALENA/PENROSE & ASSOCIAT-ES	Occupation CROP INSURANCE AGENT	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) .....	3150.00
TOTAL This Period (last page this line number only) .....	

10020734401

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

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

FOR LINE NUMBER: PAGE 39 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. GARY BENNETT</b>		Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>	
Mailing Address <b>229 E. REDWOOD STREET</b>		Transaction ID: <b>SA11.50815</b>	
City <b>HANFORD</b>	State <b>CA</b>	Zip Code <b>93230-1291</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>BENNETT &amp; BENNETT</b>	Occupation <b>BUSINESS OWNER</b>	Aggregate Year-to-Date <b>250.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. LESLIE BENNETT</b>		Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>	
Mailing Address <b>4941 ROLLING MEADOWS</b>		Transaction ID: <b>SA11.50718</b>	
City <b>ROLLING HILLS ESTA</b>	State <b>CA</b>	Zip Code <b>90274-1523</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>BENNETT LANDSCAPE</b>	Occupation <b>LANDSCAPE CONTRACTOR</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. MAXINE BENNETT</b>		Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>	
Mailing Address <b>229 E. REDWOOD STREET</b>		Transaction ID: <b>SA11.50832</b>	
City <b>HANFORD</b>	State <b>CA</b>	Zip Code <b>93230-1291</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	Aggregate Year-to-Date <b>250.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734402

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 582 (check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. SEAN BENNETT**

Mailing Address **4941 ROLLING MEADOWS**

City **ROLLING HILLS ESTA** State **CA** Zip Code **90274-1523**

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

Name of Employer **BENNETT LANDSCAPE** Occupation **LANDSCAPE CONTRACTOR**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50719**

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. STEVEN W. BENNETT**

Mailing Address **1169 EAGLEWOOD LOOP**

City **NORTH SALT LAKE** State **UT** Zip Code **84054-3361**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt **09 / 09 / 2010**

Transaction ID: **SA11.38742**

Amount of Each Receipt this Period **2000.00**

CONTRIBUTION

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

Mailing Address **2816 EASTRIDGE CIRCLE**

City **MODESTO** State **CA** Zip Code **95355-4631**

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

Name of Employer **J.S. WEST & COMPANY** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 24 / 2010**

Transaction ID: **SA11.48317**

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3000.00**

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

1002073404

**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 41 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) <b>MS. LEYDA BEQUER</b>	Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>
	Mailing Address <b>9491 BRYNMAR DRIVE</b>	Transaction ID: <b>SA11.42746</b>
	City <b>VILLA PARK</b> State <b>CA</b> Zip Code <b>92861-2601</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

B.	Full Name (Last, First, Middle Initial) <b>MRS. BROOKE BERG</b>	Date of Receipt MM / DD / YYYY <b>09 / 20 / 2010</b>
	Mailing Address <b>6263 ACACIA AVENUE</b>	Transaction ID: <b>SA11.43557</b>
	City <b>OAKLAND</b> State <b>CA</b> Zip Code <b>94618-1851</b>	Amount of Each Receipt this Period <b>1000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>CONSULTANT</b>	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

C.	Full Name (Last, First, Middle Initial) <b>MRS. TERRE BERGMAN</b>	Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
	Mailing Address <b>2417 WHITE STALLION ROAD</b>	Transaction ID: <b>SA11.29751</b>
	City <b>THOUSAND OAKS</b> State <b>CA</b> Zip Code <b>91361-5093</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073440A

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

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

FOR LINE NUMBER: PAGE 42 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MR. LOUIS BERKMAN</b>	Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
	Mailing Address <b>P.O. BOX 576</b>	Transaction ID: <b>SA11.49424</b>
	City <b>STEUBENVILLE</b> State <b>OH</b> Zip Code <b>43952-5576</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>INDUSTRIAL SUPPLIES</b> Occupation <b>SELF-EMPLOYED</b>	Aggregate Year-to-Date <b>2400.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MR. ALAN E. BERLIN</b>	Date of Receipt MM / DD / YYYY <b>09 / 22 / 2010</b>
	Mailing Address <b>P.O. BOX 5588</b>	Transaction ID: <b>SA11.45270</b>
	City <b>BEVERLY HILLS</b> State <b>CA</b> Zip Code <b>90209-5588</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>JULES BERLIN AGENCY</b> Occupation <b>INSURANCE AGENT</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. JOSHUA Y. BERLIN</b>	Date of Receipt MM / DD / YYYY <b>09 / 22 / 2010</b>
	Mailing Address <b>P.O. BOX 5588</b>	Transaction ID: <b>SA11.45269</b>
	City <b>BEVERLY HILLS</b> State <b>CA</b> Zip Code <b>90209-5588</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>JULES BERLIN AGENCY</b> Occupation <b>INSURANCE AGENT</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<b>3400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

10020734403

**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 43 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MS. CLAUDIA E. BERMUDEZ</b>	Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
Mailing Address <b>422 LINCOLN AVENUE</b>	Transaction ID: <b>SA11.47355</b>
City <b>ALAMEDA</b> State <b>CA</b> Zip Code <b>94501-3236</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>ESTAFFING, INC.</b> Occupation <b>BUSINESS OWNER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. BRIAN BERTELSEN</b>	Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>1315 E. CURTIS</b>	Transaction ID: <b>SA11.29741</b>
City <b>REEDLEY</b> State <b>CA</b> Zip Code <b>93654-9317</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>COVE RANCH MANAGEMENT</b> Occupation <b>FARMER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>LEE BEWLEY</b>	Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
Mailing Address <b>6066 MAZUELA DRIVE</b>	Transaction ID: <b>SA11.58743</b>
City <b>OAKLAND</b> State <b>CA</b> Zip Code <b>94611-2208</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734405

**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 44 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>PETER BEWLEY</b>	Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
Mailing Address <b>6066 MAZUELA DRIVE</b>	Transaction ID: <b>SA11.58733</b>
City <b>OAKLAND</b> State <b>CA</b> Zip Code <b>94611-2208</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. JOHN R. BEYSTER</b>	Date of Receipt MM / DD / YYYY <b>09 / 15 / 2010</b>
Mailing Address <b>1241 CAVE STREET</b>	Transaction ID: <b>SA11.40339</b>
City <b>LA JOLLA</b> State <b>CA</b> Zip Code <b>92037-3602</b>	Amount of Each Receipt this Period <b>2000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2000.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. BETTY BIALEK</b>	Date of Receipt MM / DD / YYYY <b>09 / 01 / 2010</b>
Mailing Address <b>200 WINDING WAY</b>	Transaction ID: <b>SA11.30292</b>
City <b>WOODSIDE</b> State <b>CA</b> Zip Code <b>94062-2539</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

100207134407



**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 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MR. FRED BIALEK</b>		Date of Receipt MM / DD / YYYY <b>09 / 01 / 2010</b>	
	Mailing Address <b>200 WINDING WAY</b>		Transaction ID: <b>SA11.30299</b>	
	City	State	Zip Code	Amount of Each Receipt this Period
	<b>WOODSIDE</b>	<b>CA</b>	<b>94062-2539</b>	<b>1000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>1000.00</b>		

<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MRS. BARBARA B. BIGELOW</b>		Date of Receipt MM / DD / YYYY <b>09 / 08 / 2010</b>	
	Mailing Address <b>P.O. BOX 43 47233 ROAD 200</b>		Transaction ID: <b>SA11.36383</b>	
	City	State	Zip Code	Amount of Each Receipt this Period
	<b>O'NEALS</b>	<b>CA</b>	<b>93645-0043</b>	<b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>PONDEROSA TELEPHONE COMPANY</b>		Occupation <b>PHONE CO. WORKER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>2400.00</b>		

<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MRS. DAPHNE B. BILIBICH</b>		Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>	
	Mailing Address <b>P.O. BOX 346</b>		Transaction ID: <b>SA11.42749</b>	
	City	State	Zip Code	Amount of Each Receipt this Period
	<b>YUBA CITY</b>	<b>CA</b>	<b>95992-0346</b>	<b>250.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>		Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>250.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3650.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073440

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

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

FOR LINE NUMBER: PAGE 46 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) MRS. MARYANN BILLINGS	Date of Receipt MM / DD / YYYY 08 / 19 / 2010
	Mailing Address P.O. BOX 1987	Transaction ID: SA11.27682
	City DELANO State CA Zip Code 93216-1987	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer BILLINGS RANCHES INC.	Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>B.</b>	Full Name (Last, First, Middle Initial) MR. ROBERT LOUIS BISHOP	Date of Receipt MM / DD / YYYY 09 / 15 / 2010
	Mailing Address 127 WALDO AVENUE	Transaction ID: SA11.40446
	City PIEDMONT State CA Zip Code 94611-3942	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SCM ADVISORS LLC	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>C.</b>	Full Name (Last, First, Middle Initial) MRS. DENISE BITTEL	Date of Receipt MM / DD / YYYY 08 / 30 / 2010
	Mailing Address 18603 VILLA DRIVE	Transaction ID: SA11.29659
	City VILLA PARK State CA Zip Code 92861-2851	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation EVENT PLANNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		3400.00
<b>TOTAL</b> This Period (last page this line number only) .....		

10020734409

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

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

FOR LINE NUMBER: PAGE 47 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MS. BARBARA A. BLACKSTOCK</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
	Mailing Address <b>P.O. BOX 369</b>	<b>Transaction ID: SA11.33520</b>
	City <b>PEBBLE BEACH</b> State <b>CA</b> Zip Code <b>93953-0369</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MR. PETER BLACKSTOCK</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
	Mailing Address <b>P.O. BOX 369</b>	<b>Transaction ID: SA11.33480</b>
	City <b>PEBBLE BEACH</b> State <b>CA</b> Zip Code <b>93953-0369</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>VICTORY TOYOTA MONTEREY</b> Occupation <b>CAR DEALER/OWNER</b>	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. JAMES C. BLAIR</b>	Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
	Mailing Address <b>1 PALMER SQUARE SUITE 515</b>	<b>Transaction ID: SA11.39386</b>
	City <b>PRINCETON</b> State <b>NJ</b> Zip Code <b>08542-3718</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>DOMAIN ASSOCIATES L.L.C.</b> Occupation <b>VENTURE CAPITAL</b>	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<b>7200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

10020734410

**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 48 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MS. BARBARA BLOOM

Mailing Address 5904 CAMINO DELACOSTA

City LAJOLLA State CA Zip Code 92037-6550

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

Name of Employer SELF-EMPLOYED Occupation INVESTMENTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2010

Transaction ID: SA11.44103

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. DAVID J. BLUMBERG

Mailing Address 580 HOWARD STREET SUITE 101

City SAN FRANCISCO State CA Zip Code 94105-3025

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

Name of Employer BLUMBERG CAPITAL Occupation VENTURE CAPITALIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2010

Transaction ID: SA11.43564

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

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

Mailing Address 21908 ALMADEN AVENUE

City CUPERTINO State CA Zip Code 95014-2861

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

Name of Employer ROCKLEDGE ASSOCIATES Occupation C.F.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 21 / 2010

Transaction ID: SA11.44106

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 2500.00

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

1002073411

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

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

FOR LINE NUMBER: PAGE 49 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MRS. MARILYN J. BOLINGBROKE

Mailing Address 18221 VIA ASCENSO

City RANCHO SANTA FE State CA Zip Code 92067

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 ▼ 500.00

Date of Receipt MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50600

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. ROBERT A. BOLINGBROKE

Mailing Address 18221 VIA ASCENSO

City RANCHO SANTA FE State CA Zip Code 92067

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 ▼ 500.00

Date of Receipt MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50664

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. PAUL R. BONDERSON, JR.

Mailing Address 8121 ALPHA LANE

City SUNOL State CA Zip Code 94586-9500

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 ▼ 7500.00

Date of Receipt MM / DD / YYYY  
08 / 23 / 2010

Transaction ID: SA11.27730

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 6000.00

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

1002073412

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

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

FOR LINE NUMBER: PAGE 50 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. PAUL R. BONDERSON, JR. Mailing Address 8121 ALPHA LANE City SUNOL State CA Zip Code 94586-9500 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 16 / 2010 Transaction ID: SA11.42695 Amount of Each Receipt this Period 2500.00 CONTRIBUTION
Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 7500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) MRS. SANDRA K. BONDERSON Mailing Address 8121 ALPHA LANE City SUNOL State CA Zip Code 94586-9500 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 08 / 23 / 2010 Transaction ID: SA11.27727 Amount of Each Receipt this Period 5000.00 CONTRIBUTION
Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) MRS. ANNE METHENY BONE Mailing Address 3372 MCGRAW LN City LAFAYETTE State CA Zip Code 94549-2314 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 07 / 2010 Transaction ID: SA11.35522 Amount of Each Receipt this Period 500.00 CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		
SUBTOTAL of Receipts This Page (optional) ..... ▶		8000.00
TOTAL This Period (last page this line number only) ..... ▶		

1002074411

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

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

FOR LINE NUMBER: PAGE 51 / 582

(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)  
CARLY VICTORY COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
MR. JON BONE

Mailing Address 3372 MCGRAW LANE

City LAFAYETTE State CA Zip Code 94549-2314

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

Name of Employer BEERE & PURVES, INC. Occupation INSURANCE SALES

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date 500.00

Date of Receipt 09 / 07 / 2010

Transaction ID: SA11.35523

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. J. DENNIS BONNEY

Mailing Address ONE 19TH AVENUE

City SAN FRANCISCO State CA Zip Code 94121-1301

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 1000.00

Date of Receipt 09 / 27 / 2010

Transaction ID: SA11.49406

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MRS. CARON BORBA

Mailing Address 14866 ROAD 200

City PORTERVILLE State CA Zip Code 93257-9309

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

Name of Employer BORBA DIARY Occupation OWNER

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date 500.00

Date of Receipt 09 / 08 / 2010

Transaction ID: SA11.36405

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 2000.00

TOTAL This Period (last page this line number only)

1002073414

**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 52 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MS. JUSTINA T. BORBA

Mailing Address 845 E. CATALINA CIRCLE

City State Zip Code  
FRESNO CA 93730-0857

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 ▼ 2400.00

Date of Receipt MM / DD / YYYY  
09 / 13 / 2010

Transaction ID: SA11.39392

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

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

Mailing Address 11054 W. MT. WHITNEY AVENUE

City State Zip Code  
RIVERDALE CA 93656-9755

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

Name of Employer SELF-EMPLOYED      Occupation FARMER

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
09 / 13 / 2010

Transaction ID: SA11.39385

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. ROSS BORBA, JR.

Mailing Address 11054 W. MT. WHITNEY

City State Zip Code  
RIVERDALE CA 93656-9755

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 ▼ 2400.00

Date of Receipt MM / DD / YYYY  
09 / 03 / 2010

Transaction ID: SA11.33585

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 9800.00

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

1002073415



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

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

FOR LINE NUMBER: PAGE 53 / 582

(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. CLYDE BORRELL</b>		Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>	
Mailing Address <b>8 BARRINGTON DRIVE</b>		Transaction ID: <b>SA11.49428</b>	
City <b>WHEELING</b>	State <b>WV</b>	Zip Code <b>26003-6667</b>	Amount of Each Receipt this Period <b>490.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>OHIO VALLEY COAL COMPANY</b>	Occupation <b>ENGINEER</b>	Aggregate Year-to-Date <b>490.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) <b>MR. JAMES W. BOYD</b>		Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>	
Mailing Address <b>1895 BUCHANNAN PLACE</b>		Transaction ID: <b>SA11.42762</b>	
City <b>MONTEREY PARK</b>	State <b>CA</b>	Zip Code <b>91755-6728</b>	Amount of Each Receipt this Period <b>2700.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>TOLL BROTHERS</b>	Occupation <b>DEVELOPER/BUILDER</b>	Aggregate Year-to-Date <b>2700.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. KAREN BOYD</b>		Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>	
Mailing Address <b>1895 BUCHANNAN PLACE</b>		Transaction ID: <b>SA11.42741</b>	
City <b>MONTEREY PARK</b>	State <b>CA</b>	Zip Code <b>91755-6728</b>	Amount of Each Receipt this Period <b>2700.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>LUMEN FINANCIAL INC</b>	Occupation <b>MANAGEMENT CONSULTANT</b>	Aggregate Year-to-Date <b>2700.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5890.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020174411

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

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

FOR LINE NUMBER: PAGE 54 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. CARL BOYETT</b>		Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>	
Mailing Address <b>3304 FLEURDE LAKES DRIVE</b>		Transaction ID: <b>SA11.39350</b>	
City <b>MODESTO</b>	State <b>CA</b>	Zip Code <b>95356</b>	Amount of Each Receipt this Period <b>5000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>BOYETT PETROLEUM</b>	Occupation <b>PETROLEUM MARKETING</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>5000.00</b>		

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. MARGARET M. BRADSHAW</b>		Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>	
Mailing Address <b>55 ROSEWOOD DRIVE</b>		Transaction ID: <b>SA11.27688</b>	
City <b>ATHERTON</b>	State <b>CA</b>	Zip Code <b>94027-2138</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>BRIDGE BANK</b>	Occupation <b>BANK EXECUTIVE</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>		

**C.**

Full Name (Last, First, Middle Initial) <b>MR. RICHARD J. BRADSHAW</b>		Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>	
Mailing Address <b>55 ROSEWOOD DRIVE</b>		Transaction ID: <b>SA11.27700</b>	
City <b>ATHERTON</b>	State <b>CA</b>	Zip Code <b>94027-2138</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734417

**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 55 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. JOHN BRADY</b>	Date of Receipt MM / DD / YYYY <b>09 / 15 / 2010</b>
Mailing Address <b>333 S. GRAND AVENUE FLOOR 28</b>	Transaction ID: <b>SA11.40481</b>
City State Zip Code <b>LOS ANGELES CA 90071-1504</b>	Amount of Each Receipt this Period <b>5000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>OAKTREE CAPITAL</b>	Occupation <b>MANAGING DIRECTOR</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>5000.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. RODNEY BRAGA</b>	Date of Receipt MM / DD / YYYY <b>09 / 01 / 2010</b>
Mailing Address <b>P.O. BOX 425</b>	Transaction ID: <b>SA11.30371</b>
City State Zip Code <b>SOLEDAD CA 93960-0425</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>BRAGA RANCH</b>	Occupation <b>FARMER</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. ANGELA FICK BRALY</b>	Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>120 MONUMENT CIRCLE</b>	Transaction ID: <b>SA11.39399</b>
City State Zip Code <b>INDIANAPOLIS IN 46204-4906</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>WELL POINT INC.</b>	Occupation <b>CEO</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>9800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073411

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

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

FOR LINE NUMBER: PAGE 56 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MRS. CAMILLA T. BRAUER</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
	Mailing Address <b>11250 HUNTER DRIVE</b>	Transaction ID: <b>SA11.33491</b>
	City <b>BRIDGETON</b> State <b>MO</b> Zip Code <b>63044-2306</b>	Amount of Each Receipt this Period <b>1500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	Aggregate Year-to-Date <b>1500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MR. STEPHEN F. BRAUER</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
	Mailing Address <b>11250 HUNTER DRIVE</b>	Transaction ID: <b>SA11.33485</b>
	City <b>BRIDGETON</b> State <b>MO</b> Zip Code <b>63044-2306</b>	Amount of Each Receipt this Period <b>1500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HUNTER ENGINEERING COMPANY</b> Occupation <b>CHAIRMAN</b>	Aggregate Year-to-Date <b>1500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. JOHN B. BRELSFORD</b>	Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
	Mailing Address <b>600 W. SHAW #160</b>	Transaction ID: <b>SA11.29740</b>
	City <b>FRESNO</b> State <b>CA</b> Zip Code <b>93704-2464</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>DIVERSIFIED DEVELOPMENT GROUP</b> Occupation <b>REAL ESTATE DEVELOPER</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

1302074411

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

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

FOR LINE NUMBER: PAGE 57 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>CARY BREN</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
	Mailing Address <b>135 EMERALD BAY</b>	Transaction ID: <b>SA11.33482</b>
	City <b>LAGUNA BEACH</b> State <b>CA</b> Zip Code <b>92651-1254</b>	Amount of Each Receipt this Period <b>10000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>CALIFORNIA PACIFIC HOMES</b> Occupation <b>PRESIDENT</b>	Aggregate Year-to-Date <b>10000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MR. EDWIN W. BREN</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
	Mailing Address <b>37 CAKERA CANYON ROAD</b>	Transaction ID: <b>SA11.50867</b>
	City <b>SALINAS</b> State <b>CA</b> Zip Code <b>93908-9300</b>	Amount of Each Receipt this Period <b>250.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>PRODUCE WEST</b> Occupation <b>PRODUCE BROKER</b>	Aggregate Year-to-Date <b>250.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MRS. JANE BREN</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
	Mailing Address <b>37 CAKERA CANYON ROAD</b>	Transaction ID: <b>SA11.50840</b>
	City <b>SALINAS</b> State <b>CA</b> Zip Code <b>93908-9300</b>	Amount of Each Receipt this Period <b>250.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b> Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Aggregate Year-to-Date <b>250.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<b>10500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

1002073420

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 582 (check only one)
<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. JAMES BRESLOW</b>	Date of Receipt MM / DD / YYYY <b>09 / 22 / 2010</b>
Mailing Address <b>245 TRANQUILLOW ROAD</b>	Transaction ID: <b>SA11.45238</b>
City <b>PACIFIC PALISADES</b> State <b>CA</b> Zip Code <b>90272-3143</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>BEST EFFORTS</b> Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Aggregate Year-to-Date <b>1000.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. DEBORAH BRIDGES</b>	Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>
Mailing Address <b>3 PREMIERE POINT</b>	Transaction ID: <b>SA11.27586</b>
City <b>NEWPORT BEACH</b> State <b>CA</b> Zip Code <b>92657-1717</b>	Amount of Each Receipt this Period <b>15200.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	Aggregate Year-to-Date <b>25200.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. DEBORAH BRIDGES</b>	Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
Mailing Address <b>3 PREMIERE POINT</b>	Transaction ID: <b>SA11.47333</b>
City <b>NEWPORT BEACH</b> State <b>CA</b> Zip Code <b>92657-1717</b>	Amount of Each Receipt this Period <b>10000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	Aggregate Year-to-Date <b>25200.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>26200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734421

**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 59 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. LARRY J. BRIDGES</b>	Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>
Mailing Address <b>3 PREMIERE POINT</b>	Transaction ID: <b>SA11.27592</b>
City <b>NEWPORT BEACH</b> State <b>CA</b> Zip Code <b>92657-1717</b>	Amount of Each Receipt this Period <b>15200.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>EXECUTIVE HILLS MANAGEMENT, INC.</b> Occupation <b>REAL ESTATE DEVELOPER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>15200.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. ROBERT A. BROCCINI</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>27011 S. AUSTIN ROAD</b>	Transaction ID: <b>SA11.50816</b>
City <b>RIPON</b> State <b>CA</b> Zip Code <b>95366-9625</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>BROCCINI</b> Occupation <b>FARMER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MS. JANICE BROOKS-GARY</b>	Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>4123 STONEBRIDGE LANE</b>	Transaction ID: <b>SA11.39364</b>
City <b>RANCHO SANTA FE</b> State <b>CA</b> Zip Code <b>92091-4556</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>UNEMPLOYED</b> Occupation <b>ATTORNEY</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>17200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734422

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

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

FOR LINE NUMBER: PAGE 60 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MR. BUZZ BROWN

Mailing Address 4117 COOLIDGE AVENUE

City State Zip Code  
OAKLAND CA 94602-3432

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

Name of Employer Occupation  
DOOLITTLE & GANOS INVESTMENT COUNSEL DIRECTOR BUSINESS DEVELOPMENT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

Transaction ID: SA11.47356

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MR. EDWARD J. BROWN, JR.

Mailing Address 721 S. PARKER STREET  
SUITE 300

City State Zip Code  
ORANGE CA 92868-4732

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

Name of Employer Occupation  
THE WORD & BROWN COMPANIES VICE PRESIDENT, SECRETARY & TREASURER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 12500.00

Date of Receipt  
MM / DD / YYYY  
09 / 20 / 2010

Transaction ID: SA11.43558

Amount of Each Receipt this Period  
12500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MR. FRED W. BROWN

Mailing Address 430 NW 5TH STREET

City State Zip Code  
OKLAHOMA CITY OK 73102-3011

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

Name of Employer Occupation  
SELF-EMPLOYED OIL & GAS EXPLORATION

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 02 / 2010

Transaction ID: SA11.33468

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

14000.00

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

1002074423



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

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

FOR LINE NUMBER: PAGE 61 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. JAY BROWN</b>		Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>	
Mailing Address <b>2280 SAPAQUE ROAD</b>		Transaction ID: <b>SA11.27581</b>	
City <b>BRADLEY</b>	State <b>CA</b>	Zip Code <b>93426-9654</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>RANCHER</b>	Aggregate Year-to-Date <b>1000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. SANDRA J. BROWN</b>		Date of Receipt MM / DD / YYYY <b>09 / 01 / 2010</b>	
Mailing Address <b>22045 S. VALENTINE</b>		Transaction ID: <b>SA11.30296</b>	
City <b>RIVERDALE</b>	State <b>CA</b>	Zip Code <b>93656-9314</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>BROWNS DAIRY</b>	Occupation <b>OWNER</b>	Aggregate Year-to-Date <b>1000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) <b>MR. STEPHEN BROWN</b>		Date of Receipt MM / DD / YYYY <b>09 / 01 / 2010</b>	
Mailing Address <b>22045 S. VALENTINE</b>		Transaction ID: <b>SA11.30301</b>	
City <b>RIVERDALE</b>	State <b>CA</b>	Zip Code <b>93656-9314</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>DAIRYMAN</b>	Aggregate Year-to-Date <b>1000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020715121

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

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

FOR LINE NUMBER: PAGE 62 / 582  
(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MRS. BARBARA BRUNO

Mailing Address 6906 CORTE DEL SOL

City State Zip Code  
MODESTO CA 95356-8887

FEC ID number of contributing federal political committee. C

Name of Employer  
INFORMATION REQUESTED PER  
BEST EFFORTS

Occupation  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

MM / DD / YYYY  
09 / 24 / 2010

Transaction ID: SA11.48342

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MR. JOHN M. BRYAN

Mailing Address 600 MONTGOMERY STREET  
35TH FLOOR

City State Zip Code  
SAN FRANCISCO CA 94111-2810

FEC ID number of contributing federal political committee. C

Name of Employer  
SELF-EMPLOYED

Occupation  
PRIVATE INVESTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt

MM / DD / YYYY  
08 / 27 / 2010

Transaction ID: SA11.29538

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MS. LACY W. BUCK

Mailing Address P.O. BOX 1933

City State Zip Code  
CARMEL BY THE SEA CA 93921-1933

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 ▼  
2400.00

Date of Receipt

MM / DD / YYYY  
08 / 27 / 2010

Transaction ID: SA11.29531

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

13400.00

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

1002073425

**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 63 / 582
<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MS. BRENDA C. BUCKERFIELD</b>		Date of Receipt MM / DD / YYYY <b>08 / 27 / 2010</b>
Mailing Address <b>19201 SONOMA HIGHWAY #403</b>		Transaction ID: <b>SA11.29530</b>
City <b>SONOMA</b>	State <b>CA</b>	Zip Code <b>95476-5413</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>BEERE &amp; PURVES INC</b>	Occupation <b>INSURANCE BROKER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. JONATHAN W. BULLEN</b>		Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>18439 CALLE LA SERRA</b>		Transaction ID: <b>SA11.50602</b>
City <b>RANCHO SANTA FE</b>	State <b>CA</b>	Zip Code <b>92091-0140</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>EAGLE GATE COLLEGE GROUP</b>	Occupation <b>C.E.O./PRESIDENT</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. RUSSELL T. BUNDY</b>		Date of Receipt MM / DD / YYYY <b>09 / 21 / 2010</b>
Mailing Address <b>2075 FAIR AVENUE</b>		Transaction ID: <b>SA11.44133</b>
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43209-1637</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>30400.00</b>
Name of Employer <b>RUSSELL T. BUNDY ASSOC. INC.</b>	Occupation <b>C.E.O.</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>30400.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>33800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734426

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

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

FOR LINE NUMBER: PAGE 64 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MS. JILL BURFORD-MINNICK

Mailing Address 1443 W. SAMPLES AVENUE

City FRESNO State CA Zip Code 93711-1948

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 01 / 2010  
Transaction ID: SA11.30355  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MRS. BEVERLY F. BURKE

Mailing Address 1208 FAIRWAY DRIVE

City BAKERSFIELD State CA Zip Code 93309-2422

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 08 / 24 / 2010  
Transaction ID: SA11.28198  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MRS. BEVERLY F. BURKE

Mailing Address 1208 FAIRWAY DRIVE

City BAKERSFIELD State CA Zip Code 93309-2422

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 09 / 01 / 2010  
Transaction ID: SA11.30354  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2000.00

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

10020734427

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

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

FOR LINE NUMBER: PAGE 65 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL P. BURKE</b>		Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>	
Mailing Address <b>211 N. BROADWAY SUITE 3600</b>		Transaction ID: <b>SA11.33486</b>	
City <b>SAINT LOUIS</b>	State <b>MO</b>	Zip Code <b>63102-2769</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>BRYAN COVE, L.L.P.</b>	Occupation <b>LAWYER</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) <b>MS. SHEILA M. BURKE</b>		Date of Receipt MM / DD / YYYY <b>08 / 26 / 2010</b>	
Mailing Address <b>P.O. BOX 117117</b>		Transaction ID: <b>SA11.29485</b>	
City <b>BURLINGAME</b>	State <b>CA</b>	Zip Code <b>94011-7117</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	Aggregate Year-to-Date <b>1000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) <b>MR. ROBERT B. BURKHEIMER</b>		Date of Receipt MM / DD / YYYY <b>09 / 22 / 2010</b>	
Mailing Address <b>1326 5TH AVENUE #708</b>		Transaction ID: <b>SA11.45224</b>	
City <b>SEATTLE</b>	State <b>WA</b>	Zip Code <b>98101-2604</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>REAL ESTATE INVESTMENTS</b>	Aggregate Year-to-Date <b>1000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

13020734428

**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 66 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MALIN BURNHAM</b>	Date of Receipt MM / DD / YYYY <b>09 / 20 / 2010</b>
Mailing Address <b>3560 KELLOGG WAY</b>	Transaction ID: <b>SA11.43585</b>
City <b>SAN DIEGO</b> State <b>CA</b> Zip Code <b>92106-3346</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>CUSHMAN &amp; WAKEFIELD</b> Occupation <b>REAL ESTATE</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MS. SHEILA O. BURNS</b>	Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>
Mailing Address <b>377 EDGEWOOD ROAD</b>	Transaction ID: <b>SA11.27577</b>
City <b>SAN MATEO</b> State <b>CA</b> Zip Code <b>94402-1170</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>ENROLLED AGENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. DAVID J. BURROUGHS</b>	Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>
Mailing Address <b>1703 GRAY AVENUE</b>	Transaction ID: <b>SA11.42696</b>
City <b>YUBA CITY</b> State <b>CA</b> Zip Code <b>95991-1540</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b> Occupation <b>BANKER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1108207134423

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

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

FOR LINE NUMBER: PAGE 67 / 582

(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

MR. KELLY BURT

Mailing Address 14385 CIERA COURT

City State Zip Code  
**SAN DIEGO CA 92128**

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

Name of Employer Occupation  
SELF-EMPLOYED OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4300.00

Date of Receipt

MM / DD / YYYY  
09 / 15 / 2010

Transaction ID: SA11.40486

Amount of Each Receipt this Period

4300.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)

MR. STEVE BUTCHER

Mailing Address P.O. BOX 5010  
PMB. 222

City State Zip Code  
**RANCHO SANTA FE CA 92067-5010**

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

Name of Employer Occupation  
S.W.B. ASSOCIATES PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt

MM / DD / YYYY  
09 / 15 / 2010

Transaction ID: SA11.40485

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)

MR. T. RICHARD BUTERA

Mailing Address P.O. BOX 3707

City State Zip Code  
**ASPEN CO 81612-3707**

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 ▼  
1000.00

Date of Receipt

MM / DD / YYYY  
09 / 22 / 2010

Transaction ID: SA11.45271

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

5800.00

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

10020734450

**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 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MS. JILL E. BUTLER

Mailing Address 11 HORSESHOE LANE

City ROLLING HILLS ESTA State CA Zip Code 90274-4823

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS  
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 03 / 2010  
Transaction ID: SA11.33588  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

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

Mailing Address P.O. BOX 77910

City CORONA State CA Zip Code 92877-0130

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS  
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2010  
Transaction ID: SA11.58927  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. RICHARD M. CAGLIA, SR.

Mailing Address 5505 E. JENSEN

City FRESNO State CA Zip Code 93725-1815

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

Name of Employer ELECTRIC MOTOR SHOP  
Occupation ELECTRICAL CONTRACTOR

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 03 / 2010  
Transaction ID: SA11.33559  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2500.00

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

10020734431



**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 69 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. TONY CAIN</b>		Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
Mailing Address <b>29835 HIGHWAY 178</b>		Transaction ID: <b>SA11.38728</b>
City <b>ONYX</b> State <b>CA</b> Zip Code <b>93255-9722</b>	Amount of Each Receipt this Period <b>500.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>	
Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>LIVESTOCK</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) <b>MR. BENNIE CALLIS</b>		Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
Mailing Address <b>807 FAIRVIEW DRIVE</b>		Transaction ID: <b>SA11.38701</b>
City <b>WOODLAND</b> State <b>CA</b> Zip Code <b>95695-6868</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>	
Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	Aggregate Year-to-Date <b>250.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. NORMAL CALLIS</b>		Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
Mailing Address <b>807 FAIRVIEW DRIVE</b>		Transaction ID: <b>SA11.38668</b>
City <b>WOODLAND</b> State <b>CA</b> Zip Code <b>95695-6868</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>	
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	Aggregate Year-to-Date <b>250.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073442

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

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

FOR LINE NUMBER: PAGE 70 / 582

(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)  
CARLY VICTORY COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
DR. ALLEN DAVID CALVIN

Mailing Address 1791 ARASTRADERO ROAD

City PALO ALTO State CA Zip Code 94304-1337

FEC ID number of contributing federal political committee. C

Name of Employer PALO ALTO UNIV Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY  
09 / 13 / 2010

Transaction ID: SA11.39368

Amount of Each Receipt this Period 2000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. DONALD MILLER CAMPBELL

Mailing Address 180 PACIFIC AVENUE

City SAN FRANCISCO State CA Zip Code 94111-1905

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 ▼ 2000.00

Date of Receipt MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58755

Amount of Each Receipt this Period 2000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. JOSEPH CAMPBELL

Mailing Address 5512 WINGFOOT DRIVE

City BAKERSFIELD State CA Zip Code 93306-3144

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
09 / 03 / 2010

Transaction ID: SA11.33571

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 9000.00

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

100207134433

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 582 (check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MRS. MARY CAMPBELL	Date of Receipt MM / DD / YYYY 09 / 10 / 2010
Mailing Address 9501 HENDERSON WAY	Transaction ID: SA11.38954
City State Zip Code VILLA PARK CA 92861-2827	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	CONTRIBUTION
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 ▼ 500.00

**B.**

Full Name (Last, First, Middle Initial) MRS. PATRICIA ANN CAMPBELL	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
Mailing Address 1004 HALTERIO COURT	Transaction ID: SA11.38692
City State Zip Code BAKERSFIELD CA 93309-2783	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	CONTRIBUTION
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 ▼ 500.00

**C.**

Full Name (Last, First, Middle Initial) MR. ROD CAMPBELL	Date of Receipt MM / DD / YYYY 08 / 16 / 2010
Mailing Address 210 GEORGINA AVENUE	Transaction ID: SA11.26320
City State Zip Code SANTA MONICA CA 90402-1616	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation RWB MARKETING EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional) .....	2000.00
TOTAL This Period (last page this line number only) .....	

10020734434

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

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

FOR LINE NUMBER: PAGE 72 / 582  
(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

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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. THOMAS CAMPBELL**

Mailing Address **4 E. EXECUTIVE PARK**

City **ATLANTA** State **GA** Zip Code **30329-2207**

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

Date of Receipt **09 / 27 / 2010**

Transaction ID: **SA11.49436**

Amount of Each Receipt this Period **6000.00**

CONTRIBUTION

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date **6000.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MRS. JULIET CAMPOS**

Mailing Address **15516 S. WALNUT**

City **CARUTHERS** State **CA** Zip Code **93609-9607**

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

Date of Receipt **09 / 09 / 2010**

Transaction ID: **SA11.38704**

Amount of Each Receipt this Period **5000.00**

CONTRIBUTION

Name of Employer **CAMPOS BROTHERS** Occupation **FARMER**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date **5000.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR. SCOTT T. CAREY**

Mailing Address **500 PORTOLA ROAD**

City **PORTOLA VALLEY** State **CA** Zip Code **94028-7645**

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

Date of Receipt **09 / 16 / 2010**

Transaction ID: **SA11.42642**

Amount of Each Receipt this Period **2500.00**

CONTRIBUTION

Name of Employer **CORMISH & CAREY COMMITTEE** Occupation **ATTORNEY**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date **2500.00**

**SUBTOTAL** of Receipts This Page (optional) ..... **13500.00**

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

10020734434

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

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

FOR LINE NUMBER: PAGE 73 / 582  
(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

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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MRS. SUSAN CAREY

Mailing Address 500 PORTOLA ROAD

City State Zip Code  
PORTOLA VALLEY CA 94028-7645

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

Name of Employer Occupation  
SELF-EMPLOYED DESIGNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

Transaction ID: SA11.42633

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. LEROY L. CARLSON

Mailing Address 23355A VIA LINDA

City State Zip Code  
MISSION VIEJO CA 92691-6863

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

Name of Employer Occupation  
LEVICA BUILDERS INC. CONTRACTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
08 / 31 / 2010

Transaction ID: SA11.29703

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. SCOTT A. CARLSON

Mailing Address 13814 E. CARUTHERS AVENUE

City State Zip Code  
KINGSBURG CA 93631-9702

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

Name of Employer Occupation  
KINSBURG INSURANCE AGENCY INSURANCE AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36382

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 4000.00

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

10020734430

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

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

FOR LINE NUMBER: PAGE 74 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MS. SUZANNE M. CARO**

Mailing Address **964 GROSVENOR PLACE**

City **OAKLAND** State **CA** Zip Code **94610-2549**

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

Name of Employer **EAST BAY SOTHEBY'S INT'L REALTY** Occupation **REALTOR**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 10 / 2010**

Transaction ID: **SA11.38970**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MRS. DORIS O. CASSAN**

Mailing Address **2737 78TH AVENUE SE SUITE 201**

City **MERCER ISLAND** State **WA** Zip Code **98040-2843**

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

Name of Employer **DOLLAR DEVELOPMENT** Occupation **SELF-EMPLOYED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 24 / 2010**

Transaction ID: **SA11.48296**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**MR. JAMES CASSAN**

Mailing Address **2737 78TH AVENUE SE SUITE 201**

City **MERCER ISLAND** State **WA** Zip Code **98040-2843**

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

Name of Employer **DOLLAR DEVELOPMENT COMPANY** Occupation **CEO**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 24 / 2010**

Transaction ID: **SA11.48292**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2500.00**

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

1002073437

**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 75 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. MANUEL CASTANEDA</b>	Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
Mailing Address <b>19315 E. SAN JOSE AVENUE</b>	Transaction ID: <b>SA11.58923</b>
City State Zip Code <b>CITY OF INDUSTRY CA 91748-1420</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>N.F.I.-P.T.N.</b>	Occupation <b>ADMINISTRATOR</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. LISA S. CELLA</b>	Date of Receipt MM / DD / YYYY <b>08 / 27 / 2010</b>
Mailing Address <b>1350 TROT BLVD. #470</b>	Transaction ID: <b>SA11.29542</b>
City State Zip Code <b>WALNUT CREEK CA 94597-2153</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. PETER F. CELLA</b>	Date of Receipt MM / DD / YYYY <b>08 / 27 / 2010</b>
Mailing Address <b>1350 TROT BLVD. #470</b>	Transaction ID: <b>SA11.29545</b>
City State Zip Code <b>WALNUT CREEK CA 94597-2153</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>BEERE &amp; PURVES</b>	Occupation <b>SALES</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734433

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 582 (check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JAMES M. CESARE**

Mailing Address **6756 IRON OAK DRIVE**

City **BAKERSFIELD** State **CA** Zip Code **93312-5046**

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

Date of Receipt **09 / 24 / 2010**

Transaction ID: **SA11.48303**

Amount of Each Receipt this Period **300.00**

CONTRIBUTION

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date **300.00**

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

Mailing Address **9337 E. SOUTH AVENUE**

City **SELMA** State **CA** Zip Code **93662-9768**

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

Date of Receipt **08 / 26 / 2010**

Transaction ID: **SA11.29405**

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

Name of Employer **SELF-EMPLOYED** Occupation **FARMING**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date **500.00**

**C.** Full Name (Last, First, Middle Initial)  
**DR. JOSEPH H. CHANG**

Mailing Address **10307 WITHIN HEIGHTS DRIVE**

City **BAKERSFIELD** State **CA** Zip Code **93311-4948**

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

Date of Receipt **09 / 20 / 2010**

Transaction ID: **SA11.43614**

Amount of Each Receipt this Period **5000.00**

CONTRIBUTION

Name of Employer **DR. JOSEPH H. CHANG** Occupation **PHYSICIAN**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date **5000.00**

**SUBTOTAL** of Receipts This Page (optional) ..... **5800.00**

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

11007074000



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

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

FOR LINE NUMBER: PAGE 77 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. JOHN R. CHAPMAN	Date of Receipt MM / DD / YYYY 09 / 16 / 2010
	Mailing Address 2261 WHISTLEWOOD COURT	Transaction ID: SA11.42748
	City YUBA CITY State CA Zip Code 95991-8315	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
<b>B.</b>	Full Name (Last, First, Middle Initial) DR. BARRY CHEHRAZI	Date of Receipt MM / DD / YYYY 09 / 29 / 2010
	Mailing Address 7320 SHELBORNE DRIVE	Transaction ID: SA11.50860
	City GRANITE BAY State CA Zip Code 95746-8615	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation SURGEON	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>C.</b>	Full Name (Last, First, Middle Initial) DR. ANNE BENTON CHUTER	Date of Receipt MM / DD / YYYY 09 / 20 / 2010
	Mailing Address P.O. BOX 7551	Transaction ID: SA11.43560
	City MENLO PARK State CA Zip Code 94026-7551	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SAN MATEO COUNTY MEDICAL CENTER	Occupation MEDICAL DOCTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional) .....		1750.00
TOTAL This Period (last page this line number only) .....		

130320741

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

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

FOR LINE NUMBER: PAGE 78 / 582

(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. ARTHUR A. CIOCCA</b>		Date of Receipt MM / DD / YYYY <b>09 / 24 / 2010</b>	
Mailing Address <b>9 25TH AVENUE NORTH</b>		Transaction ID: <b>SA11.48318</b>	
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94121-1104</b>	Amount of Each Receipt this Period <b>5000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>THE WINE GROUP INC.</b>	Occupation <b>CHAIRMAN</b>	Aggregate Year-to-Date <b>5000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) <b>MS. PATRICIA T. CLANEY</b>		Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>	
Mailing Address <b>3624 GOODLAND AVENUE</b>		Transaction ID: <b>SA11.33456</b>	
City <b>STUDIO CITY</b>	State <b>CA</b>	Zip Code <b>91604-2310</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>HEALTHNET</b>	Occupation <b>EXTERNAL AFFAIRS</b>	Aggregate Year-to-Date <b>1000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) <b>MR. DOUGLAS CLARK</b>		Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>	
Mailing Address <b>235 BELMONT AVENUE</b>		Transaction ID: <b>SA11.50850</b>	
City <b>LOS GATOS</b>	State <b>CA</b>	Zip Code <b>95030-5208</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>WILSON SONSINI GOODRICH &amp; ROSATI</b>	Occupation <b>ATTORNEY</b>	Aggregate Year-to-Date <b>1000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>7000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

11  
10  
09  
08  
07  
06  
05  
04  
03  
02  
01

**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 79 / 582
<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. RUSSELL B. CLARK</b>		Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>
Mailing Address <b>631 DANIEL DRIVE</b>		Transaction ID: <b>SA11.42701</b>
City <b>YUBA CITY</b>	State <b>CA</b>	Zip Code <b>95993-9350</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>SELF EMPLOYED</b>		Occupation <b>BUSINESS OWNER</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	<b>CONTRIBUTION</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. STANLEY M. CLEVELAND, JR.</b>		Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>
Mailing Address <b>868 FRANKLIN AVENUE</b>		Transaction ID: <b>SA11.42702</b>
City <b>YUBA CITY</b>	State <b>CA</b>	Zip Code <b>95991-5440</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>COUNTY OF SUTTER CITIZENS</b>		Occupation <b>COUNTY SUPERVISOR</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	<b>CONTRIBUTION</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. DORIS COANE</b>		Date of Receipt MM / DD / YYYY <b>09 / 20 / 2010</b>
Mailing Address <b>P.O. BOX 4148</b>		Transaction ID: <b>SA11.43595</b>
City <b>SONORA</b>	State <b>CA</b>	Zip Code <b>95370-4148</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>SELF-EMPLOYED</b>		Occupation <b>FARMER</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	<b>CONTRIBUTION</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1302073442

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

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

FOR LINE NUMBER: PAGE 80 / 582

(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)  
CARLY VICTORY COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
MR. ROBERT COANE

Mailing Address P.O. BOX 4148

City SONORA State CA Zip Code 95370-4148

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
09 / 20 / 2010

Transaction ID: SA11.43606

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. FRANK COELHO, JR.

Mailing Address P.O. BOX 216

City FIVE POINTS State CA Zip Code 93624-0216

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

Name of Employer CASACA VINEYARDS Occupation FARMING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt MM / DD / YYYY  
09 / 03 / 2010

Transaction ID: SA11.33561

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. LOUIS C. COGLIANI

Mailing Address 494 TYNDALL STREET

City LOS ALTOS State CA Zip Code 94022-3916

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 ▼ 500.00

Date of Receipt MM / DD / YYYY  
09 / 15 / 2010

Transaction ID: SA11.40345

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3400.00

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

10020734443

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

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

FOR LINE NUMBER: PAGE 81 / 582  
(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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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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MRS. KATHY COIT

Mailing Address 2578 S. LYON AVENUE

City MENDOTA State CA Zip Code 93640-9738

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 ▼ 500.00

Date of Receipt 08 / 23 / 2010

Transaction ID: SA11.27714

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. WILLIAM COIT

Mailing Address 2578 S. LYON AVENUE

City MENDOTA State CA Zip Code 93640-9738

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

Name of Employer COIT FARMING COMPANY Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2010

Transaction ID: SA11.27718

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. RONALD COLBURN

Mailing Address P.O. BOX 568

City VISALIA State CA Zip Code 93279-0568

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

Name of Employer T. S. & L. SEED COMPANY Occupation SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 08 / 2010

Transaction ID: SA11.36381

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1500.00

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

1002073444

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

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

FOR LINE NUMBER: PAGE 82 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. DARRELL H. COLE

Mailing Address 2319 EDMONT AVENUE

City BRISTOL State TN Zip Code 37620-4756

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

Name of Employer UNITED CENTRAL INDUSTRIAL SUPPLY Occupation PRESIDENT

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2010  
Transaction ID: SA11.49438  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

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

Mailing Address 7611 S. TOWNSHIP ROAD

City YUBA CITY State CA Zip Code 95993-9719

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

Name of Employer COLE FARMS Occupation FARMER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 16 / 2010  
Transaction ID: SA11.42684  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

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

Mailing Address 157 WILDWOOD GARDENS

City PIEDMONT State CA Zip Code 94611-3833

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 10 / 2010  
Transaction ID: SA11.38934  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ► 1250.00

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 / 582

(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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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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. NANCY R. COLELLA Mailing Address 3000 SAND HILL ROAD #4-210 City MENLO PARK State CA Zip Code 94025-7117 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation N/A Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 7500.00		Date of Receipt 08 / 19 / 2010 Transaction ID: SA11.27691 Amount of Each Receipt this Period 7500.00 CONTRIBUTION
<b>B.</b> Full Name (Last, First, Middle Initial) MR. SAMUEL D. COLELLA Mailing Address 3000 SAND HILL ROAD #4-210 City MENLO PARK State CA Zip Code 94025-7117 FEC ID number of contributing federal political committee. C Name of Employer VERSANT VENTURES Occupation VENTURE CAPITALIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 7500.00		Date of Receipt 08 / 19 / 2010 Transaction ID: SA11.27696 Amount of Each Receipt this Period 7500.00 CONTRIBUTION
<b>C.</b> Full Name (Last, First, Middle Initial) MR. JOHN M. COLEMAN Mailing Address 1801 AVENUE OF STATE #705 City LOS ANGELES State CA Zip Code 90067-5802 FEC ID number of contributing federal political committee. C Name of Employer COLEMAN PARTNERSHIP Occupation PARTNER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00		Date of Receipt 09 / 29 / 2010 Transaction ID: SA11.50855 Amount of Each Receipt this Period 500.00 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional) ..... ▶		15500.00
TOTAL This Period (last page this line number only) ..... ▶		

10020734445

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

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

FOR LINE NUMBER: PAGE 84 / 582  
(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. GAYLA COMPTON Mailing Address 737 BRYANT STREET City PALO ALTO State CA Zip Code 94301-2504 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 01 / 2010 Transaction ID: SA11.30276
	Amount of Each Receipt this Period 2400.00 CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation WRITER
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.00
<b>B.</b> Full Name (Last, First, Middle Initial) MR. KEVIN R. COMPTON Mailing Address 737 BRYANT STREET City PALO ALTO State CA Zip Code 94301-2504 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 01 / 2010 Transaction ID: SA11.30287
	Amount of Each Receipt this Period 2400.00 CONTRIBUTION
	Name of Employer RADAR PARTNERS Occupation VENTURE CAPITAL
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.00
<b>C.</b> Full Name (Last, First, Middle Initial) MR. P. GREGORY CONLON Mailing Address 43 VIRGINIA LANE City ATHERTON State CA Zip Code 94027-3042 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 08 / 26 / 2010 Transaction ID: SA11.29488
	Amount of Each Receipt this Period 250.00 CONTRIBUTION
	Name of Employer CONLON ASSOCIATES Occupation PRESIDENT
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
SUBTOTAL of Receipts This Page (optional) ..... ▶	
TOTAL This Period (last page this line number only) ..... ▶	

5050.00

1002073447



**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 85 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. LARRY A. CONWAY

Mailing Address P.O. BOX 208

City MORRISTOWN State OH Zip Code 43759-0208

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

Name of Employer OHIO VALLEY COAL COMPANY Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2010

Transaction ID: SA11.49440

Amount of Each Receipt this Period 500.00

CONTRIBUTION

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

Mailing Address 74615 WREN DR

City INDIAN WELLS State CA Zip Code 92210-7363

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 ▼ 15200.00

Date of Receipt 08 / 03 / 2010

Transaction ID: SA11.26311

Amount of Each Receipt this Period 15200.00

CONTRIBUTION

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

Mailing Address 74615 WREN DR

City INDIAN WELLS State CA Zip Code 92210-7363

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 ▼ 15200.00

Date of Receipt 08 / 03 / 2010

Transaction ID: SA11.26310

Amount of Each Receipt this Period 15200.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 30900.00

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

10020734448

**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 86 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>LINDA H. COOLEY</b>	Date of Receipt MM / DD / YYYY <b>09 / 07 / 2010</b>
Mailing Address <b>31391 AMMIDA MADRID</b>	Transaction ID: <b>SA11.35514</b>
City <b>SAN JUAN CAPO</b> State <b>CA</b> Zip Code <b>92675</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>ALMICH &amp; ASSOCIATES</b> Occupation <b>PARTNER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MS NANCY A. COOTES</b>	Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
Mailing Address <b>42 EASTFIELD DRIVE</b>	Transaction ID: <b>SA11.58948</b>
City <b>ROLLING HILLS</b> State <b>CA</b> Zip Code <b>90274-5262</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. ROY M. COOTES</b>	Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
Mailing Address <b>42 EASTFIELD DRIVE</b>	Transaction ID: <b>SA11.58949</b>
City <b>ROLLING HILLS</b> State <b>CA</b> Zip Code <b>90274-5262</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>CHANDLER'S AIR CONDITIONING</b> Occupation <b>PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5050.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073449

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

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

FOR LINE NUMBER: PAGE 87 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. MARION MOORE COPE Mailing Address 1000 MASON STREET City State Zip Code SAN FRANCISCO CA 94108-1961 FEC ID number of contributing federal political committee. C	Date of Receipt MM / DD / YYYY 09 / 10 / 2010 Transaction ID: SA11.38935 Amount of Each Receipt this Period 500.00 CONTRIBUTION	
	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 ▼ 500.00	
	Full Name (Last, First, Middle Initial) CAROL S. COPELAND Mailing Address 444 E. NEES AVENUE City State Zip Code CLOVIS CA 93611 FEC ID number of contributing federal political committee. C	Date of Receipt MM / DD / YYYY 09 / 09 / 2010 Transaction ID: SA11.38730 Amount of Each Receipt this Period 2500.00 CONTRIBUTION
	Name of Employer Occupation GOODE OL' DAYS ANTIQUE ST-ORE OWNER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MR. PETER P. COPSES Mailing Address 2000 AVENUE OF THE STARS City State Zip Code LOS ANGELES CA 90067-4700 FEC ID number of contributing federal political committee. C	Date of Receipt MM / DD / YYYY 09 / 08 / 2010 Transaction ID: SA11.36413 Amount of Each Receipt this Period 5000.00 CONTRIBUTION	
	Name of Employer Occupation APOLLO MANAGEMENT L.P. INVESTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	
	SUBTOTAL of Receipts This Page (optional) ..... ▶ 8000.00	
	TOTAL This Period (last page this line number only) ..... ▶	

13  
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**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 88 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>DR. DONALD CORNFORTH</b>		Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>		
	Mailing Address <b>P.O. BOX 2103</b>		Transaction ID: <b>SA11.38968</b>		
	City <b>BAKERSFIELD</b>	State <b>CA</b>	Zip Code <b>93303-2103</b>	Amount of Each Receipt this Period <b>500.00</b>	
	FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION		
Name of Employer <b>QUEST IMAGING</b>		Occupation <b>PHYSICIAN</b>		CONTRIBUTION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>500.00</b>			
Full Name (Last, First, Middle Initial) <b>MRS. EDNA CORNFORTH</b>		Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>			
Mailing Address <b>P.O. BOX 2103</b>		Transaction ID: <b>SA11.38963</b>			
<b>B.</b>	City <b>BAKERSFIELD</b>		State <b>CA</b>	Zip Code <b>93303-2103</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION		
	Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>		CONTRIBUTION
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>500.00</b>		
Full Name (Last, First, Middle Initial) <b>MR. JOHN S. CORRY</b>		Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>			
Mailing Address <b>1698 MARKET STREET #127</b>		Transaction ID: <b>SA11.50786</b>			
<b>C.</b>	City <b>REDDING</b>		State <b>CA</b>	Zip Code <b>96001-1021</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION		
	Name of Employer <b>SELF-EMPLOYED</b>		Occupation <b>MANAGEMENT CONSULTANT</b>		CONTRIBUTION
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>500.00</b>		
<b>SUBTOTAL of Receipts This Page (optional) ..... ▶</b>					
<b>TOTAL This Period (last page this line number only) ..... ▶</b>					

**1500.00**

10020744431

**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 89 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. JACK CORWIN</b>	Date of Receipt MM / DD / YYYY <b>09 / 22 / 2010</b>
Mailing Address <b>2150 N. LINCOLN STREET</b>	Transaction ID: <b>SA11.45239</b>
City <b>BURBANK</b> State <b>CA</b> Zip Code <b>91504-3337</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HUNTINGTON HOLDINGS</b> Occupation <b>C.E.O.</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. CHARLOTTE COUILLARD</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>33228 ROAD 132</b>	Transaction ID: <b>SA11.50819</b>
City <b>VISALIA</b> State <b>CA</b> Zip Code <b>93292-9386</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. RONN COUILLARD</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>33228 ROAD 132</b>	Transaction ID: <b>SA11.50833</b>
City <b>VISALIA</b> State <b>CA</b> Zip Code <b>93292-9386</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

11 09 20 14 14 12



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

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

FOR LINE NUMBER: PAGE 91 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. GRANT CRAVEN</b>		Date of Receipt MM / DD / YYYY <b>09 / 20 / 2010</b>	
Mailing Address <b>P.O. BOX 336</b>		Transaction ID: <b>SA11.43593</b>	
City <b>CROWS LANDING</b>	State <b>CA</b>	Zip Code <b>95313-0336</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>FARMER</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) <b>MR. DONALD J. CREVIER</b>		Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>	
Mailing Address <b>1500 AUTO MALL DRIVE</b>		Transaction ID: <b>SA11.29711</b>	
City <b>SANTA ANA</b>	State <b>CA</b>	Zip Code <b>92705-4737</b>	Amount of Each Receipt this Period <b>1500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>CREVIER B.M.W.</b>	Occupation <b>C.E.O.</b>	Aggregate Year-to-Date <b>1500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) <b>CHARLES CROCKER</b>		Date of Receipt MM / DD / YYYY <b>08 / 11 / 2010</b>	
Mailing Address <b>ONE POST STREET</b>		Transaction ID: <b>SA11.26281</b>	
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94104-5201</b>	Amount of Each Receipt this Period <b>2000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	Aggregate Year-to-Date <b>2000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4000.00</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 92 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MS. GEORGIANA L. CRONIN

Mailing Address 1070 LOMBARD STREET

City State Zip Code  
SAN FRANCISCO CA 94109-1557

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

Name of Employer Occupation  
SELF-EMPLOYED INVESTMENTS

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

MM / DD / YYYY  
09 / 22 / 2010

Transaction ID: SA11.45219

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MRS. JOAN P. CRONIN

Mailing Address 17552 THUNDER MOUNTAIN ROAD

City State Zip Code  
EUREKA MO 63025-2214

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

MM / DD / YYYY  
09 / 02 / 2010

Transaction ID: SA11.33490

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MR. LESTER R. CROOK

Mailing Address 1255 NEBO ROAD

City State Zip Code  
MADISONVILLE KY 42431-8827

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

Name of Employer Occupation  
G.C.R. TIRE SALES MANAGEMENT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50633

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

1050.00

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

13020734455



**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 93 / 582
<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. BRAD CULBERTSON</b>		Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>3437 PALO VISTA DRIVE</b>		Transaction ID: <b>SA11.50783</b>
City <b>RANCHO PALOS VERDE</b>	State <b>CA</b>	Zip Code <b>90275-6158</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>SALES</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. JOHN CULLOM</b>		Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
Mailing Address <b>1 PARKSIDE DRIVE</b>		Transaction ID: <b>SA11.47382</b>
City <b>PIEDMONT</b>	State <b>CA</b>	Zip Code <b>94611-4226</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>SALES</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. WILLIAM C. CUMMINGS</b>		Date of Receipt MM / DD / YYYY <b>08 / 16 / 2010</b>
Mailing Address <b>1625 CREEKSIDE DRIVE STE. 201</b>		Transaction ID: <b>SA11.26287</b>
City <b>FOLSOM</b>	State <b>CA</b>	Zip Code <b>95630-3819</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>10000.00</b>
Name of Employer <b>WILLIAM CUMMINGS REALTY</b>	Occupation <b>REAL ESTATE DEVELOPMENT</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>10000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>11000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

110320714

**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 94 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. PAUL CUNNINGHAM</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>226 6TH STREET</b>	Transaction ID: <b>SA11.50784</b>
City <b>HERMOSA BEACH</b> State <b>CA</b> Zip Code <b>90254-4512</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>CREATIVE HEADS INC.</b> Occupation <b>SALES</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MS. MARY ALLIS CURRAN</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>P.O. BOX 675332</b>	Transaction ID: <b>SA11.50779</b>
City <b>RANCHO SANTA FE</b> State <b>CA</b> Zip Code <b>92067-5332</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>UNION BANK</b> Occupation <b>BANKER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. BARBARA H. CURRY</b>	Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
Mailing Address <b>315 ROBINWOOD LANE</b>	Transaction ID: <b>SA11.47358</b>
City <b>HILLSBOROUGH</b> State <b>CA</b> Zip Code <b>94010-7160</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734457

**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 95 / 582
<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. JAMES T. CURRY, JR.

Mailing Address 315 ROBINWOOD LANE

City Hillsborough State CA Zip Code 94010-7160

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 ▼ 250.00

Date of Receipt 09 / 23 / 2010

Transaction ID: SA11.47375

Amount of Each Receipt this Period 250.00

CONTRIBUTION

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

Mailing Address 15632 GRAHAM STREET

City HUNTINGTON BEACH State CA Zip Code 92649-1611

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation PROPERTY DEVELOPMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 09 / 30 / 2010

Transaction ID: SA11.58952

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

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

Mailing Address 15632 GRAHAM STREET

City HUNTINGTON BEACH State CA Zip Code 92649-1611

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 ▼ 2400.00

Date of Receipt 09 / 30 / 2010

Transaction ID: SA11.58951

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 5050.00

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

100207443

**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 96 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MR. WILLIAM R. DAHLGREN		Date of Receipt MM / DD / YYYY 09 / 07 / 2010
Mailing Address 1345 VIA CORONEL		Transaction ID: SA11.35508
City PALOS VERDES ESTAT	State CA	Zip Code 90274-1937
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer AIRTECH	Occupation EXECUTIVE	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) MR. JOHN C. DANFORTH		Date of Receipt MM / DD / YYYY 09 / 08 / 2010
Mailing Address 911 TIRRILL FARMS ROAD		Transaction ID: SA11.36394
City ST. LOUIS	State MO	Zip Code 63124-1631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer BRYAN CAVE L.L.P.	Occupation ATTORNEY	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) MR. TOM DANIEL		Date of Receipt MM / DD / YYYY 09 / 21 / 2010
Mailing Address 2542 1/2 FORTHILL DRIVE		Transaction ID: SA11.44104
City VISTA	State CA	Zip Code 92084-6578
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer G.B.C. CONCRETE & MASONRY	Occupation C.E.O./CONTRACTOR	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

100207 13 44

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 582
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MR. STEPHEN F. DANNA, JR.		Date of Receipt MM / DD / YYYY 09 / 16 / 2010
Mailing Address 491 LYNDSLEY LANE		Transaction ID: SA11.42703
City YUBA CITY	State CA	Zip Code 95993-7802
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer SELF-EMPLOYED	Occupation FARMING	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**B.**

Full Name (Last, First, Middle Initial) MR. MICHAEL A. DARNELL		Date of Receipt MM / DD / YYYY 09 / 16 / 2010
Mailing Address 1947 2ND AVENUE P.O. BOX 92		Transaction ID: SA11.42704
City SUTTER	State CA	Zip Code 95982-2307
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 750.00	
Name of Employer COLDWELL BANKERE COMMERCIAL	Occupation REAL ESTATE AGENT	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

**C.**

Full Name (Last, First, Middle Initial) MR. DARWIN R. DATWYLER		Date of Receipt MM / DD / YYYY 08 / 23 / 2010
Mailing Address P.O. BOX 222060		Transaction ID: SA11.27712
City CARMEL	State CA	Zip Code 93922-2060
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2400.00	
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional) .....	3400.00
TOTAL This Period (last page this line number only) .....	

10020734460

**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 98 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MR. STUART DAVIDSON		Date of Receipt MM / DD / YYYY 09 / 13 / 2010
Mailing Address 2540 HIDDEN VALLEY PLACE		Transaction ID: SA11.39358
City LA JOLLA	State CA	Zip Code 92037-4019
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) MR. THOMAS N. DAVIDSON		Date of Receipt MM / DD / YYYY 09 / 22 / 2010
Mailing Address 7 SUNRISE CAY		Transaction ID: SA11.45225
City KEY LARGO	State FL	Zip Code 33037-5301
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**C.**

Full Name (Last, First, Middle Initial) MR. WILLIAM H. DAVIDOW		Date of Receipt MM / DD / YYYY 08 / 19 / 2010
Mailing Address 85 ROBLES DRIVE		Transaction ID: SA11.27690
City WOODSIDE	State CA	Zip Code 94062-2528
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2400.00	
Name of Employer MOHR DAVIDOW VENTURES	Occupation INVESTOR	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073451

**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 99 / 582
<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. PAUL L. DAVIES, JR.</b>		Date of Receipt MM / DD / YYYY <b>09 / 20 / 2010</b>
Mailing Address <b>3697 MT. DIABLO BLVD. SUITE 205</b>		Transaction ID: <b>SA11.43612</b>
City <b>LAFAYETTE</b>	State <b>CA</b>	Zip Code <b>94549-3754</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>RETIRED</b>		<b>CONTRIBUTION</b>
Occupation <b>RETIRED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>2400.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. MORGAN DAVIS</b>		Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>10 WHALERS BLUFF</b>		Transaction ID: <b>SA11.50747</b>
City <b>NEWPORT COAST</b>	State <b>CA</b>	Zip Code <b>92657-2136</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2500.00</b>
Name of Employer <b>RETIRED</b>		<b>CONTRIBUTION</b>
Occupation <b>RETIRED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>2500.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. ROBERT W. DAVIS</b>		Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
Mailing Address <b>6520 LAGUNITAS AVENUE</b>		Transaction ID: <b>SA11.49407</b>
City <b>EL CERRITO</b>	State <b>CA</b>	Zip Code <b>94530-1560</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>RETIRED</b>		<b>CONTRIBUTION</b>
Occupation <b>RETIRED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>250.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5150.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1302073462

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

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

FOR LINE NUMBER: PAGE 100 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MRS. TERAN DAVIS

Mailing Address 4924 BALBOA BLVD  
STE 489

City ENCINO State CA Zip Code 91316-3402

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 ▼ 0.00

Date of Receipt MM / DD / YYYY  
08 / 06 / 2010

Transaction ID: SA11.27737A

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

CHARGED BACK \$2,400.00 ON 08/09/2010

**B.**

Full Name (Last, First, Middle Initial)  
MRS. TERAN DAVIS

Mailing Address 4924 BALBOA BLVD  
STE 489

City ENCINO State CA Zip Code 91316-3402

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 ▼ 0.00

Date of Receipt MM / DD / YYYY  
08 / 09 / 2010

Transaction ID: SA11.27737B

Amount of Each Receipt this Period -2400.00

CONTRIBUTION

CHARGED BACK

**C.**

Full Name (Last, First, Middle Initial)  
MR. WILLIAM LLOYD DAVIS

Mailing Address 4924 BALBOA BLVD  
STE 489

City ENCINO State CA Zip Code 91316-3402

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR & DEVELOPER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt MM / DD / YYYY  
08 / 06 / 2010

Transaction ID: SA11.27738A

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

CHARGED BACK \$2,400.00 ON 08/09/2010

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2400.00

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

1002073445



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

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

FOR LINE NUMBER: PAGE 101 / 582  
(check only one)

11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. WILLIAM LLOYD DAVIS

Mailing Address 4924 BALBOA BLVD  
STE 489

City ENCINO State CA Zip Code 91316-3402

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR & DEVELOPER

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date 0.00

Date of Receipt 08 / 09 / 2010

Transaction ID: SA11.27738B

Amount of Each Receipt this Period -2400.00

CONTRIBUTION

CHARGED BACK

**B.** Full Name (Last, First, Middle Initial)  
MS. LINDA L. DEALY

Mailing Address 2640 DEL MAR HEIGHTS #214

City DEL MAR State CA Zip Code 92014-3110

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

Name of Employer THE DEALY GROUP Occupation OWNER

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date 500.00

Date of Receipt 09 / 30 / 2010

Transaction ID: SA11.58912

Amount of Each Receipt this Period 500.00

CONTRIBUTION

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

Mailing Address 26393 ROAD 22 1/2

City CHOWCHILLA State CA Zip Code 93610-9624

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

Name of Employer SELF-EMPLOYED Occupation FARMING

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date 250.00

Date of Receipt 09 / 01 / 2010

Transaction ID: SA11.30374

Amount of Each Receipt this Period 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ **-1650.00**

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

1002073446

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

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

FOR LINE NUMBER: PAGE 102 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MR. RICHARD DEBENEDETTO</b>	Date of Receipt MM / DD / YYYY <b>09 / 01 / 2010</b>
	Mailing Address <b>26393 ROAD 22 1/2</b>	Transaction ID: <b>SA11.30379</b>
	City <b>CHOWCHILLA</b> State <b>CA</b> Zip Code <b>93610-9624</b>	Amount of Each Receipt this Period <b>250.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>FARMER</b>	Aggregate Year-to-Date <b>250.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MR. DWIGHT W. DECKER</b>	Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>
	Mailing Address <b>10332 SHANGRI LANE DRIVE</b>	Transaction ID: <b>SA11.42742</b>
	City <b>HUNTINGTON BEACH</b> State <b>CA</b> Zip Code <b>92646-3759</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	Aggregate Year-to-Date <b>2400.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. FREDERICK J. DEGROSZ</b>	Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
	Mailing Address <b>618 MANZANITA WAY</b>	Transaction ID: <b>SA11.38936</b>
	City <b>WOODSIDE</b> State <b>CA</b> Zip Code <b>94062-1219</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>CONSULTANT</b>	Aggregate Year-to-Date <b>2400.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<b>5050.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

10020734455

**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 103 / 582
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. BRUCE E. DEL MAR</b>	Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
Mailing Address <b>2471 RIVIERA DRIVE</b>	Transaction ID: <b>SA11.47373</b>
City <b>LAGUNA BEACH</b> State <b>CA</b> Zip Code <b>92651-1013</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>DEL MAR AVIONICS</b> Occupation <b>PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. ROY E. DEMMON</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>706 WEBSTER STREET</b>	Transaction ID: <b>SA11.50774</b>
City <b>PALO ALTO</b> State <b>CA</b> Zip Code <b>94301-2628</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. SHIELA DENNIS</b>	Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
Mailing Address <b>1931 PORT TOWNSEND CIRCLE</b>	Transaction ID: <b>SA11.47385</b>
City <b>NEWPORT BEACH</b> State <b>CA</b> Zip Code <b>92660-6607</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>NONE</b> Occupation <b>NONE</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734433

**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 104 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. STEVE L. DENNIS</b>		Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
Mailing Address <b>P.O. BOX 368</b>		Transaction ID: <b>SA11.38987</b>
City <b>MAXWELL</b>	State <b>CA</b>	Zip Code <b>95955-0368</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>500.00</b>	
Name of Employer <b>CANAL FARMS</b>	Occupation <b>AGRICULTURE</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL F. DER MANOUEL, JR.</b>		Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
Mailing Address <b>2536 W. BEECHWOOD AVENUE</b>		Transaction ID: <b>SA11.38691</b>
City <b>FRESNO</b>	State <b>CA</b>	Zip Code <b>93711-7020</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>INSURANCE BROKER</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. ROBERT DEROSE</b>		Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
Mailing Address <b>P.O. BOX 8167</b>		Transaction ID: <b>SA11.58742</b>
City <b>RANCHO SANTA FE</b>	State <b>CA</b>	Zip Code <b>92067-8167</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>250.00</b>	
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734467

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

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

FOR LINE NUMBER: PAGE 105 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MRS. SUSAN DEROSE</b>		Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>	
Mailing Address <b>P.O. BOX 8167</b>		Transaction ID: <b>SA11.58728</b>	
City <b>RANCHO SANTA FE</b>	State <b>CA</b>	Zip Code <b>92067-8167</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>		Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>250.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. DONNA M. DERR</b>		Date of Receipt MM / DD / YYYY <b>09 / 21 / 2010</b>	
Mailing Address <b>1750 TAYLOR STREET UNIT 2201</b>		Transaction ID: <b>SA11.44135</b>	
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94133-5440</b>	Amount of Each Receipt this Period <b>4800.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>4800.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. KENNETH T. DERR</b>		Date of Receipt MM / DD / YYYY <b>09 / 21 / 2010</b>	
Mailing Address <b>1750 TAYLOR STREET UNIT 2201</b>		Transaction ID: <b>SA11.44140</b>	
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94133-5440</b>	Amount of Each Receipt this Period <b>4800.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>4800.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>9850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

110020744

**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 106 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL DESIMONI**

Mailing Address **100 W. CUTTING BLVD.**

City **RICHMOND** State **CA** Zip Code **94804-2014**

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

Name of Employer **CHANNEL LUMBER** Occupation **SALES**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **09 / 20 / 2010**

Transaction ID: **SA11.43615**

Amount of Each Receipt this Period **5000.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. JOAN L. DEZEMBER**

Mailing Address **P.O. BOX 22470**

City **BAKERSFIELD** State **CA** Zip Code **93390-2470**

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 ▼ **2500.00**

Date of Receipt **08 / 31 / 2010**

Transaction ID: **SA11.29716**

Amount of Each Receipt this Period **2500.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. RAYBURN S. DEZEMBER**

Mailing Address **P.O. BOX 22470**

City **BAKERSFIELD** State **CA** Zip Code **93390-2470**

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 ▼ **2500.00**

Date of Receipt **08 / 31 / 2010**

Transaction ID: **SA11.29758**

Amount of Each Receipt this Period **2500.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **10000.00**

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

10020734463

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

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

FOR LINE NUMBER: PAGE 107 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>PARAM PREET DHILLON</b>		Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>	
Mailing Address <b>100 CITRINE CIRCLE</b>		Transaction ID: <b>SA11.42705</b>	
City <b>SACRAMENTO</b>	State <b>CA</b>	Zip Code <b>95834-3838</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>DHILLON REALTY</b>	Occupation <b>REAL ESTATE</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) <b>MR. DAVID A. DICESARIS</b>		Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>	
Mailing Address <b>P.O. BOX 980636</b>		Transaction ID: <b>SA11.38741</b>	
City <b>PARK CITY</b>	State <b>UT</b>	Zip Code <b>84098-0636</b>	Amount of Each Receipt this Period <b>2000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Aggregate Year-to-Date <b>11600.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) <b>MR. DAVID A. DICESARIS</b>		Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>	
Mailing Address <b>P.O. BOX 980636</b>		Transaction ID: <b>SA11.38947</b>	
City <b>PARK CITY</b>	State <b>UT</b>	Zip Code <b>84098-0636</b>	Amount of Each Receipt this Period <b>9600.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Aggregate Year-to-Date <b>11600.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>12100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073470

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

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

FOR LINE NUMBER: PAGE 108 / 582  
(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MS. ANN K. DICKINSON

Mailing Address 1200 W. 55TH STREET

City State Zip Code  
KANSAS CITY MO 64113-1107

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

Name of Employer Occupation  
DICKINSON FINANCIAL CORP CHAIRMAN

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

Transaction ID: SA11.47370

Amount of Each Receipt this Period  
1500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MR. BILL DIEDRICH

Mailing Address 7357 W. TENAYA

City State Zip Code  
FRESNO CA 93723-9324

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

Name of Employer Occupation  
SELF-EMPLOYED FARMER/BUSINESS OWNER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36412

Amount of Each Receipt this Period  
1200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MRS. KAREN DIEDRICH

Mailing Address 7357 W. TENAYA

City State Zip Code  
FRESNO CA 93723-9324

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

Name of Employer Occupation  
F. U. S. D. TEACHER/HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36404

Amount of Each Receipt this Period  
1200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

3900.00

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

1002073471



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

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

FOR LINE NUMBER: PAGE 109 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. BOB DIEPERSLOOT**

Mailing Address **14221 AVENUE 14**

City **MADERA** State **CA** Zip Code **93637-9016**

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

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **08 / 26 / 2010**

Transaction ID: **SA11.29467**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MR. JAMES V. DIETRICH**

Mailing Address **1463 HIGHWAY 99**

City **GRIDLEY** State **CA** Zip Code **95948-9701**

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

Name of Employer **STUKE NURSERY** Occupation **OWNER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **08 / 26 / 2010**

Transaction ID: **SA11.29403**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**LAURA DIETZ**

Mailing Address **3535 E COAST HIGHWAY**

City **CORONA DEL MAR** State **CA** Zip Code **92625-2404**

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 ▼ **250.00**

Date of Receipt **09 / 07 / 2010**

Transaction ID: **SA11.35363**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1250.00**

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

10020734472

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 582 (check only one)
<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MRS. ANNE DIFIORE		Date of Receipt MM / DD / YYYY 09 / 01 / 2010
Mailing Address 7150 MIDCREST DRIVE		Transaction ID: SA11.30369
City DALLAS	State TX	Zip Code 75254-8030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

**B.**

Full Name (Last, First, Middle Initial) MR. BERNARD P. DIFIORE		Date of Receipt MM / DD / YYYY 09 / 01 / 2010
Mailing Address 7150 MIDCREST DRIVE		Transaction ID: SA11.30377
City DALLAS	State TX	Zip Code 75254-8030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00
Name of Employer BENEFITMALL, INC.	Occupation C.E.O.	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

**C.**

Full Name (Last, First, Middle Initial) MR. GREGORY L. DILLION		Date of Receipt MM / DD / YYYY 08 / 19 / 2010
Mailing Address 7 BODEGA BAY DRIVE		Transaction ID: SA11.27572
City CORONA DEL MAR	State CA	Zip Code 92625-1002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12500.00
Name of Employer NEUMEYER & DILLION	Occupation ATTORNEY	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12500.00	

SUBTOTAL of Receipts This Page (optional) .....	14900.00
TOTAL This Period (last page this line number only) .....	

110207134471

**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 111 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. JAMIE DILLON

Mailing Address 2040 FRANKLIN STREET #501

City SAN FRANCISCO State CA Zip Code 94109-2903

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

Name of Employer B.N.P. Occupation BANKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 09 / 23 / 2010

Transaction ID: SA11.47359

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

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

Mailing Address 17844 JOYAS COURT

City POWAY State CA Zip Code 92064-1005

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

Name of Employer PERFORMANCE E.D.C. PRODUCTS Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 29 / 2010

Transaction ID: SA11.50778

Amount of Each Receipt this Period 10000.00

CONTRIBUTION

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

Mailing Address P.O. BOX 376

City GLENBROOK State NV Zip Code 89413-0376

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2010

Transaction ID: SA11.58926

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 13400.00

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

1002073447A

**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 112 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. RUSSELL M. DOE

Mailing Address 165 HIGH SIERRA DRIVE

City EXETER State CA Zip Code 93221-9794

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date 1000.00

Date of Receipt 08 / 26 / 2010

Transaction ID: SA11.29473

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. RUSSELL M. DOE

Mailing Address 165 HIGH SIERRA DRIVE

City EXETER State CA Zip Code 93221-9794

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date 1000.00

Date of Receipt 09 / 29 / 2010

Transaction ID: SA11.50820

Amount of Each Receipt this Period 500.00

CONTRIBUTION

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

Mailing Address 759 TIBURON BLVD

City TIBURON State CA Zip Code 94920-1402

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 08 / 03 / 2010

Transaction ID: SA11.26302

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 2000.00

TOTAL This Period (last page this line number only)

10020734475

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

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

FOR LINE NUMBER: PAGE 113 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) MS. DORENE DOMINGUEZ		Date of Receipt MM / DD / YYYY 08 / 23 / 2010		
	Mailing Address 4540 DUCKHORN DRIVE #200		Transaction ID: SA11.27717		
	City SACRAMENTO	State CA	Zip Code 95834-2597	Amount of Each Receipt this Period 10000.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer VANIR GROUP OF COMPANIES		Occupation PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00			
<b>B.</b>	Full Name (Last, First, Middle Initial) MS. CAROL V. DONOGHUE		Date of Receipt MM / DD / YYYY 09 / 30 / 2010		
	Mailing Address 10011 FOXRUN ROAD		Transaction ID: SA11.58749		
	City SANTA ANA	State CA	Zip Code 92705-6419	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer SELF-EMPLOYED		Occupation REAL ESTATE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			
<b>C.</b>	Full Name (Last, First, Middle Initial) MRS. VALERIE P. DONOGHUE		Date of Receipt MM / DD / YYYY 09 / 08 / 2010		
	Mailing Address 8200 SANTALUZ VILLAGE GREEN N.		Transaction ID: SA11.36399		
	City SAN DIEGO	State CA	Zip Code 92127-2521	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (optional) .....			11000.00		
TOTAL This Period (last page this line number only) .....					

10020734475

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

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

FOR LINE NUMBER: PAGE 114 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MS. KATHERINE H. DRAKE</b>	Date of Receipt MM / DD / YYYY <b>09 / 17 / 2010</b>
	Mailing Address <b>6000 BROADWAY</b>	Transaction ID: <b>SA11.43491</b>
	City <b>OAKLAND</b> State <b>CA</b> Zip Code <b>94618-1801</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MRS. PHYLLIS C. DRAPER</b>	Date of Receipt MM / DD / YYYY <b>08 / 16 / 2010</b>
	Mailing Address <b>91 TALLWOOD COURT</b>	Transaction ID: <b>SA11.26286</b>
	City <b>ATHERTON</b> State <b>CA</b> Zip Code <b>94027-6431</b>	Amount of Each Receipt this Period <b>2700.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	Aggregate Year-to-Date <b>2700.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. WILLIAM H. DRAPER, III</b>	Date of Receipt MM / DD / YYYY <b>08 / 16 / 2010</b>
	Mailing Address <b>91 TALLWOOD COURT</b>	Transaction ID: <b>SA11.26285</b>
	City <b>ATHERTON</b> State <b>CA</b> Zip Code <b>94027-6431</b>	Amount of Each Receipt this Period <b>2700.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>DRAPER INTERNATIONAL</b> Occupation <b>VENTURE CAPITAL</b>	Aggregate Year-to-Date <b>2700.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<b>5900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

10020734477

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

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

FOR LINE NUMBER: PAGE 115 / 582  
(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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. MICHAEL DREYER**

Mailing Address **355 S. GRAND AVENUE #1710**

City **LOS ANGELES** State **CA** Zip Code **90071-1532**

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

Name of Employer **DREYER EDMONDS & ROBBINS** Occupation **CPA**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 08 / 2010**

Transaction ID: **SA11.36429**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MS. THERESA M. DROUILLARD**

Mailing Address **3903 CAMINITO CASSIS**

City **SAN DIEGO** State **CA** Zip Code **92122-1994**

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

Name of Employer **LEVIT-ZACKS** Occupation **CPA**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 13 / 2010**

Transaction ID: **SA11.39357**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**MR. TIMOTHY M. DRURY**

Mailing Address **15 SQUIRES LANE**

City **HUNTLEIGH** State **MO** Zip Code **63131-4811**

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

Name of Employer **DRURY DEVELOPMENT CORPORATION** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **09 / 08 / 2010**

Transaction ID: **SA11.36393**

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3400.00**

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

10020734478

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

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

FOR LINE NUMBER: PAGE 116 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. JAMES T. DUARTE**

Mailing Address **1800 BALDWIN ROAD**

City State Zip Code  
**HUGHSON CA 95326-9300**

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

Name of Employer Occupation  
**DUARTE NURSERY, INC. BUSINESS PARTNER/OWNER**

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
**08 / 25 / 2010**

Transaction ID: **SA11.28219**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MR. JOHN DUARTE**

Mailing Address **6706 DUSTY LANE**

City State Zip Code  
**MODESTO CA 95357-1021**

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

Name of Employer Occupation  
**DUARTE NURSERY, INC. GROWER**

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
**09 / 09 / 2010**

Transaction ID: **SA11.38708**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MR. ALEXANDER W. DUFF**

Mailing Address **425 CALIFORNIA STREET  
SUITE 2450**

City State Zip Code  
**SAN FRANCISCO CA 94104-2214**

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

Name of Employer Occupation  
**PIX SYSTEM LLC EXECUTIVE VP**

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
**09 / 16 / 2010**

Transaction ID: **SA11.42631**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **2500.00**

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 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MS. MARILYN DUFF

Mailing Address 1112 CERRITOS DRIVE

City FULLERTON State CA Zip Code 92835-4020

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 09 / 30 / 2010  
Transaction ID: SA11.58750  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

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

Mailing Address 106 CARAVEL PLACE

City WINTERSVILLE State OH Zip Code 43953-7609

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

Name of Employer DUFFY EQUIPMENT COMPANY Occupation SELF-EMPLOYED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 27 / 2010  
Transaction ID: SA11.49451  
Amount of Each Receipt this Period 2000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. DAVID H. DUN

Mailing Address P.O. BOX 369

City EUREKA State CA Zip Code 95502-0369

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

Name of Employer DUN & MARTINEK, L.L.P. Occupation ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2010  
Transaction ID: SA11.50864  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3250.00

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

10020734480

**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 118 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>MRS. LAURA R. DUN</b>		Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>P.O. BOX 369</b>		Transaction ID: <b>SA11.50873</b>
City <b>EUREKA</b>	State <b>CA</b>	Zip Code <b>95502-0369</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	

B. Full Name (Last, First, Middle Initial) <b>MRS. ELSA DUNION</b>		Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>
Mailing Address <b>105 SANTA ROSA PLACE</b>		Transaction ID: <b>SA11.27684</b>
City <b>SANTA BARBARA</b>	State <b>CA</b>	Zip Code <b>93109-2139</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	

C. Full Name (Last, First, Middle Initial) <b>MR. JOHN J. DUNION, IV</b>		Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>
Mailing Address <b>105 SANTA ROSA PLACE</b>		Transaction ID: <b>SA11.27699</b>
City <b>SANTA BARBARA</b>	State <b>CA</b>	Zip Code <b>93109-2139</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>CKE RESTAURANTS</b>	Occupation <b>VICE PRESIDENT</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734481

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

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

FOR LINE NUMBER: PAGE 119 / 582  
(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MR. PETER DWARES

Mailing Address 331 FILBERT STREET

City State Zip Code  
SAN FRANCISCO CA 94133-3234

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
DWARES GROUP, INC. REAL ESTATE DEVELOPER

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2010

Transaction ID: SA11.49408

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MR. DALE DYKEMA

Mailing Address 1963 VISTA CAUDAL

City State Zip Code  
NEWPORT BEACH CA 92660-3915

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
T. D. SERVICE FINANCIAL CORP EXECUTIVE

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 30400.00

Date of Receipt  
MM / DD / YYYY  
08 / 19 / 2010

Transaction ID: SA11.27570

Amount of Each Receipt this Period  
30400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MS. ANN DYKZEUL

Mailing Address 8937 W. GRAYSON ROAD

City State Zip Code  
MODESTO CA 95358-9640

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
ISLAND DAIRY PRESIDENT

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

Transaction ID: SA11.48341

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 31900.00

TOTAL This Period (last page this line number only)

10020734432

**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 120 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MRS. JAIME DYKZEUL

Mailing Address 8955 W. GRAYSON ROAD

City: **MODESTO**   State: **CA**   Zip Code: **95358-9640**

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

Name of Employer: **INFORMATION REQUESTED PER BEST EFFORTS**   Occupation: **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼   **250.00**

Date of Receipt: **09 / 24 / 2010**

Transaction ID: SA11.48305

Amount of Each Receipt this Period: **250.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. VINCE DYKZEUL

Mailing Address 8955 W. GRAYSON ROAD

City: **MODESTO**   State: **CA**   Zip Code: **95358-9640**

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

Name of Employer: **SELF-EMPLOYED**   Occupation: **DAIRYMAN**

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼   **250.00**

Date of Receipt: **09 / 24 / 2010**

Transaction ID: SA11.48311

Amount of Each Receipt this Period: **250.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. ROBERT J. EATON

Mailing Address 9675 MASHIE COURT

City: **NAPLES**   State: **FL**   Zip Code: **34108-1997**

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 ▼   **2400.00**

Date of Receipt: **09 / 24 / 2010**

Transaction ID: SA11.48288

Amount of Each Receipt this Period: **2400.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶   **2900.00**

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

141  
133  
125  
117  
109  
101  
93  
85  
77  
69  
61  
53  
45  
37  
29  
21  
13  
5

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

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

FOR LINE NUMBER: PAGE 121 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MRS. CAROL COELHO EDDE

Mailing Address 7118 N. SEQUOIA AVENUE

City FRESNO State CA Zip Code 93711-0475

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

Name of Employer COELHO WEST Occupation PARTNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2010  
Transaction ID: SA11.29739  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. LARRY D. EDDE

Mailing Address 7118 N. SEQUOIA AVENUE

City FRESNO State CA Zip Code 93711-0475

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

Name of Employer A.O.N. RISK SERVICES Occupation INSURANCE BROKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2010  
Transaction ID: SA11.29765  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. JAMES R. EDWARDS

Mailing Address 13912 MERCADO DRIVE

City DEL MAR State CA Zip Code 92014-3124

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

Name of Employer CUBIC CORPORATION Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2010  
Transaction ID: SA11.47374  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 750.00

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

100207147

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

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

FOR LINE NUMBER: PAGE 122 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS. JOAN M. EDWARDS**

Mailing Address **13912 MERCADO DRIVE**

City **DEL MAR** State **CA** Zip Code **92014-3124**

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

Name of Employer **WORKSMART PROMOTIONS, INC.** Occupation **BUSINESS OWNER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 23 / 2010**

Transaction ID: **SA11.47349**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MRS. KIMBERLEY J. EDWARDS**

Mailing Address **18779 AVENUE 314**

City **VISALIA** State **CA** Zip Code **93292-9608**

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 ▼ **500.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50821**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS. KATHLEEN EFIRD**

Mailing Address **14580 S. CEDAR AVENUE**

City **FRESNO** State **CA** Zip Code **93725-9673**

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 ▼ **500.00**

Date of Receipt **08 / 26 / 2010**

Transaction ID: **SA11.29466**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1250.00**

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

15  
03  
7  
13  
19  
25  
31

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

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

FOR LINE NUMBER: PAGE 123 / 582  
(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MR. RUSSEL EFIRD

Mailing Address 14580 S. CEDAR AVENUE

City State Zip Code  
FRESNO CA 93725-9673

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
DOUBLE E. FARMS INC. FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
08 / 26 / 2010

Transaction ID: SA11.29492

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MS. ROBIN EHNSZ

Mailing Address 3438 BRADSHAW ROAD

City State Zip Code  
WHEATLAND CA 95692-9705

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 17 / 2010

Transaction ID: SA11.43487

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
ROBERT J. EICHENBERG

Mailing Address 1 COLLINS ISLAND

City State Zip Code  
NEWPORT BEACH CA 92662-1003

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
ELLISON EDUCATIONAL EQUIP- MENT CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2010

Transaction ID: SA11.26283

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

2000.00

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

1002074488

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

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

FOR LINE NUMBER: PAGE 124 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MRS. GEORGEANN C. EISKAMP

Mailing Address 30 W. RIANDA ROAD

City WATSONVILLE State CA Zip Code 95076-0740

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

Name of Employer COWLES BERRY FARM Occupation BLACKBERRY GROWER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
08 / 19 / 2010

Transaction ID: SA11.27689

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MRS. CHRISTIN F. ELLIS

Mailing Address 11 LYON

City NEWPORT COAST State CA Zip Code 92657-1100

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 ▼ 2400.00

Date of Receipt MM / DD / YYYY  
09 / 21 / 2010

Transaction ID: SA11.44116

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. DAVID L. ELLIS

Mailing Address 11 LYON

City NEWPORT COAST State CA Zip Code 92657-1100

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

Name of Employer DELTA PARTNERS, L.L.C. Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt MM / DD / YYYY  
09 / 28 / 2010

Transaction ID: SA11.50795

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 5800.00

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

10020734437



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

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

FOR LINE NUMBER: PAGE 125 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MR. STANLEY W. ELLIS

Mailing Address P.O. BOX 5427

City BAKERSFIELD State CA Zip Code 93388-5427

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

Name of Employer SIERRA PROCESS SYSTEMS INC. Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 16 / 2010

Transaction ID: SA11.26284

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. DAVID ELLMAN

Mailing Address 7849 REVELLE DRIVE

City LA JOLLA State CA Zip Code 92037-3538

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

Name of Employer GERBER GOLDSCHMIDT GROUP Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2010

Transaction ID: SA11.58915

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. SCOTT M. ELROD

Mailing Address 25 WEST SHORE ROAD

City BELVEDERE State CA Zip Code 94920-2461

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 ▼ 500.00

Date of Receipt 09 / 16 / 2010

Transaction ID: SA11.42736

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 6000.00

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

10020744

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

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

FOR LINE NUMBER: PAGE 126 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. CRAIG M. ENGLE

Mailing Address 1050 CONNECTICUT AVENUE NW

City WASHINGTON State DC Zip Code 20036-5303

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

Name of Employer ARENT FOX Occupation PARTNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2010  
Transaction ID: SA11.45272  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MS. JANET D. ERICKSON

Mailing Address 17 BRINDISI

City LAGUNA NIGUEL State CA Zip Code 92677-9028

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

Name of Employer DEL TACO L.L.C. Occupation EXECUTIVE VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2010  
Transaction ID: SA11.50796  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

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

Mailing Address 22895 S. DICKENSON AVENUE

City RIVERDALE State CA Zip Code 93656-9640

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

Name of Employer ERROSABERE RANCHES Occupation FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 09 / 09 / 2010  
Transaction ID: SA11.36441  
Amount of Each Receipt this Period 2400.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3650.00

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

10  
11  
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**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 127 / 582
<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MS. TRACI ESTES**

Mailing Address **4160 SUISUN VALLEY ROAD  
SUITE E201**

City **FAIRFIELD** State **CA** Zip Code **94534-4016**

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

Name of Employer **F.M. SMITH PARTS & EQUIPMENT COMPANY** Occupation **ADMINISTRATOR**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **09 / 22 / 2010**

Transaction ID: **SA11.45230**

Amount of Each Receipt this Period **5000.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. G. ROBERT EVANS**

Mailing Address **5478 QUAIL MEADOWS DRIVE**

City **CARMEL** State **CA** Zip Code **93923-7969**

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 ▼ **2400.00**

Date of Receipt **08 / 27 / 2010**

Transaction ID: **SA11.29528**

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. HUGH EVANS, JR.**

Mailing Address **1741 OLD RANCH ROAD**

City **LOS ANGELES** State **CA** Zip Code **90049-2507**

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 **08 / 19 / 2010**

Transaction ID: **SA11.27591**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **8400.00**

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

10020734430

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

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

FOR LINE NUMBER: PAGE 128 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MR. JAROLD A. EVANS</b>	Date of Receipt MM / DD / YYYY <b>09 / 01 / 2010</b>
	Mailing Address <b>8 HORSESHOE BEND</b>	Transaction ID: <b>SA11.30288</b>
	City <b>PORTOLA VALLEY</b> State <b>CA</b> Zip Code <b>94028-8019</b>	Amount of Each Receipt this Period <b>1000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	Aggregate Year-to-Date <b>1000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MRS. LYNN EVANS</b>	Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>
	Mailing Address <b>1741 OLD RANCH ROAD</b>	Transaction ID: <b>SA11.27587</b>
	City <b>LOS ANGELES</b> State <b>CA</b> Zip Code <b>90049-2507</b>	Amount of Each Receipt this Period <b>1000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	Aggregate Year-to-Date <b>1000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MRS. PATRICIA M. EVANS</b>	Date of Receipt MM / DD / YYYY <b>09 / 01 / 2010</b>
	Mailing Address <b>8 HORSESHOE BEND</b>	Transaction ID: <b>SA11.30278</b>
	City <b>PORTOLA VALLEY</b> State <b>CA</b> Zip Code <b>94028-8019</b>	Amount of Each Receipt this Period <b>1000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	Aggregate Year-to-Date <b>1000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

1002073401

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

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

FOR LINE NUMBER: PAGE 129 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MR. JAMES H. EVEREST

Mailing Address 6301 N. WESTERN  
SUTEI 240

City OKLAHOMA CITY State OK Zip Code 73118-1064

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 ▼ 1000.00

Date of Receipt 09 / 02 / 2010  
Transaction ID: SA11.33492  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. MARSHALL EZRALON

Mailing Address 23622 CALABASAS ROAD S. #200

City CALABASAS State CA Zip Code 91302-1509

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 13 / 2010  
Transaction ID: SA11.39370  
Amount of Each Receipt this Period 2000.00  
CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MRS. JOAN FABIANO

Mailing Address P.O. BOX 9635

City RANCHO SANTA FE State CA Zip Code 92067-4635

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 ▼ 1000.00

Date of Receipt 09 / 15 / 2010  
Transaction ID: SA11.40456  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 4000.00

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

1002073452

**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 130 / 582
<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. MANUEL FARIA</b>		Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
Mailing Address <b>13927 ROAD 136</b>		Transaction ID: <b>SA11.36449</b>
City <b>TIPTON</b>	State <b>CA</b>	Zip Code <b>93272-9718</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1500.00</b>
Name of Employer <b>VETTER RANCHES</b>	Occupation <b>FARMER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1500.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MS. MARIA MANETTI FARRAR</b>		Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>1090 CHESTNUT STREET</b>		Transaction ID: <b>SA11.29707</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94109-1230</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>3000.00</b>
Name of Employer <b>VILLA MILLE ROSE VINYARDS</b>	Occupation <b>MANAGER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>3000.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL FAVISH</b>		Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>7957 ENTRADA DE LUZ W.</b>		Transaction ID: <b>SA11.39365</b>
City <b>SAN DIEGO</b>	State <b>CA</b>	Zip Code <b>92127-2512</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>GUARDION HEALTH SCIENCES</b>	Occupation <b>CEO</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734403

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

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

FOR LINE NUMBER: PAGE 131 / 582  
(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
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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. KURTIS FECHTMEYER**

Mailing Address **5132 PROCTOR AVENUE**

City **OAKLAND** State **CA** Zip Code **94618-2712**

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

Name of Employer **HENRY INCORPORATED** Occupation **INVESTMENT BANKER**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date **2400.00**

Date of Receipt **09 / 15 / 2010**

Transaction ID: **SA11.40479**

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MR. DAN FEDER**

Mailing Address **7688 NORTHERN LIGHTS**

City **SAN DIEGO** State **CA** Zip Code **92127-4811**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date **1800.00**

Date of Receipt **09 / 30 / 2010**

Transaction ID: **SA11.58928**

Amount of Each Receipt this Period **1800.00**

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS. RANDY A. FIFIELD**

Mailing Address **222 S. RIVERSIDE PLAZA SUITE 600**

City **CHICAGO** State **IL** Zip Code **60606-6173**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date **1000.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50716**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **5200.00**

**TOTAL** This Period (last page this line number only) ..... **5200.00**

10020734434

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

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

FOR LINE NUMBER: PAGE 132 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. P. RANDOLPH FINCH, JR.**

Mailing Address **1503 EL CAMINO DEL TEATRO**

City **LA JOLLA** State **CA** Zip Code **92037-6301**

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

Name of Employer **MARKS, GOLIA & FINCH LLP** Occupation **ATTORNEY**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **09 / 21 / 2010**

Transaction ID: **SA11.44136**

Amount of Each Receipt this Period **2400.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**DR. RAYMOND FINK**

Mailing Address **8451 CLIFFRIDGE LANE**

City **LA JOLLA** State **CA** Zip Code **92037-2119**

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 ▼ **500.00**

Date of Receipt **09 / 30 / 2010**

Transaction ID: **SA11.58729**

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MR. CHARLES P. FINKBINER**

Mailing Address **P.O. BOX 5000-233**

City **RANCHO SANTA FE** State **CA** Zip Code **92067**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2900.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50601**

Amount of Each Receipt this Period **2900.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5800.00**

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

10020734405



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

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

FOR LINE NUMBER: PAGE 133 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. HOWARD A. FISH</b>		Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>	
Mailing Address <b>65 LOPEZ AVENUE</b>		Transaction ID: <b>SA11.49410</b>	
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94116-1450</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>SKYLINE CONSTRUCTION</b>	Occupation <b>VICE PRESIDENT</b>	Aggregate Year-to-Date <b>1000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) <b>MR. HOWARD A. FISH</b>		Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>	
Mailing Address <b>65 LOPEZ AVENUE</b>		Transaction ID: <b>SA11.58745</b>	
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94116-1450</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>SKYLINE CONSTRUCTION</b>	Occupation <b>VICE PRESIDENT</b>	Aggregate Year-to-Date <b>1000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) <b>MR. DANIEL BRIAN FITZPATRICK</b>		Date of Receipt MM / DD / YYYY <b>09 / 20 / 2010</b>	
Mailing Address <b>4220 EDISON LAKES PARKWAY</b>		Transaction ID: <b>SA11.43584</b>	
City <b>MISHAWAKA</b>	State <b>IN</b>	Zip Code <b>46545-1462</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>QUALITY DINING, INC.</b>	Occupation <b>CHAIRMAN &amp; C.E.O.</b>	Aggregate Year-to-Date <b>1000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734400

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

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

FOR LINE NUMBER: PAGE 134 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MR. DAVID W. FLEMING		Date of Receipt MM / DD / YYYY 08 / 19 / 2010	
Mailing Address 355 S. GRAND AVENUE SUITE 1000		Transaction ID: SA11.27590	
City LOS ANGELES	State CA	Zip Code 90071-1560	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer SELF-EMPLOYED	Occupation ATTORNEY	Aggregate Year-to-Date 2400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) MR. DAVID W. FLEMING		Date of Receipt MM / DD / YYYY 09 / 22 / 2010	
Mailing Address 355 S. GRAND AVENUE SUITE 1000		Transaction ID: SA11.45255	
City LOS ANGELES	State CA	Zip Code 90071-1560	Amount of Each Receipt this Period 1400.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer SELF-EMPLOYED	Occupation ATTORNEY	Aggregate Year-to-Date 2400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) MS. SHERYL FLEMING		Date of Receipt MM / DD / YYYY 09 / 30 / 2010	
Mailing Address 706 ZUMWALT LANE		Transaction ID: SA11.58748	
City FOSTER CITY	State CA	Zip Code 94404-3635	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer SELF/ALAIN PINEL	Occupation REALTOR	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2900.00

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

10020734497

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

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

FOR LINE NUMBER: PAGE 135 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. KIM FLETCHER</b>		Date of Receipt MM / DD / YYYY <b>08 / 23 / 2010</b>	
Mailing Address <b>530 LOMAS SANTA FE DRIVE SUITE C.</b>		Transaction ID: <b>SA11.27720</b>	
City <b>SOLANA BEACH</b>	State <b>CA</b>	Zip Code <b>92075-1346</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>INVESTORS LEASING CORPORATION</b>	Occupation <b>REAL ESTATE</b>	Aggregate Year-to-Date <b>2400.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) <b>MR. WILLIAM S. FLOYD, JR.</b>		Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>	
Mailing Address <b>150 LASANDRA WAY</b>		Transaction ID: <b>SA11.33521</b>	
City <b>PORTOLA VALLEY</b>	State <b>CA</b>	Zip Code <b>94028-7312</b>	Amount of Each Receipt this Period <b>2000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	Aggregate Year-to-Date <b>5000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) <b>MR. WILLIAM S. FLOYD, JR.</b>		Date of Receipt MM / DD / YYYY <b>09 / 24 / 2010</b>	
Mailing Address <b>150 LASANDRA WAY</b>		Transaction ID: <b>SA11.48320</b>	
City <b>PORTOLA VALLEY</b>	State <b>CA</b>	Zip Code <b>94028-7312</b>	Amount of Each Receipt this Period <b>3000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	Aggregate Year-to-Date <b>5000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) .....	<b>7400.00</b>
TOTAL This Period (last page this line number only) .....	

10020744

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

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

FOR LINE NUMBER: PAGE 136 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MS. SHARON FOGG

Mailing Address 26752 DOMINION WAY

City State Zip Code  
**SAN JUAN CAPISTRAN CA 92675-1403**

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

Name of Employer Occupation  
**GLOBAL MARKETING STRATEGY DIRECTOR OF BRANDING**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
MM / DD / YYYY  
**08 / 31 / 2010**

Transaction ID: SA11.29719

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. PAUL F. FOLINO

Mailing Address 3333 SUSAN STREET

City State Zip Code  
**COSTA MESA CA 92626-1632**

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

Name of Employer Occupation  
**EMULEX CORPORATION EXECUTIVE CHAIRMAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2400.00**

Date of Receipt  
MM / DD / YYYY  
**09 / 28 / 2010**

Transaction ID: SA11.50797

Amount of Each Receipt this Period  
**2400.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. JOHN R. FORELLI

Mailing Address 69717 CRESTVIEW LANE

City State Zip Code  
**ST CLAIRSVILLE OH 43950-8313**

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

Name of Employer Occupation  
**THE OHIO VALLEY COAL COMP- ANY MINING ENGINEER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**950.00**

Date of Receipt  
MM / DD / YYYY  
**09 / 27 / 2010**

Transaction ID: SA11.49456

Amount of Each Receipt this Period  
**950.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3600.00**

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

10020734403

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

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

FOR LINE NUMBER: PAGE 137 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. GREG FOREST**

Mailing Address **401 HEBRON CIRCLE**

City **SACRAMENTO** State **CA** Zip Code **95835-2062**

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

Name of Employer **HEFNER STARK & MAROIS** Occupation **ATTORNEY**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 16 / 2010**

Transaction ID: **SA11.42706**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MR. DENNIS W. FORS**

Mailing Address **4814 HAMPTON ROAD**

City **LA CANADA** State **CA** Zip Code **91011-2610**

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

Name of Employer **BANK OF THE WEST** Occupation **BANKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 30 / 2010**

Transaction ID: **SA11.58979**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS. LINDA G. FORS**

Mailing Address **4814 HAMPTON ROAD**

City **LA CANADA** State **CA** Zip Code **91011-2610**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 30 / 2010**

Transaction ID: **SA11.58954**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **750.00**

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

10020744300

**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 138 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. JUAN Y. FORSTER

Mailing Address 12245 CIRCULA PANORAMA

City **SANTA ANA** State **CA** Zip Code **92705-1376**

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 ▼ **500.00**

Date of Receipt **09 / 10 / 2010**

Transaction ID: SA11.38956

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. JON A. FOSHEIM

Mailing Address 25531 LONE PINE CIRCLE

City **LAGUNA HILLS** State **CA** Zip Code **92653-5847**

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

Name of Employer **OAK HILL REIT MANAGEMENT LLC** Occupation **CEO**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 10 / 2010**

Transaction ID: SA11.38957

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

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

Mailing Address 16715 W. BELMONT

City **KERMAN** State **CA** Zip Code **93630-9552**

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

Name of Employer **KERMAN UNIFIED** Occupation **TEACHER**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 01 / 2010**

Transaction ID: SA11.30294

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... **1250.00**

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

10020734501

**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 139 / 582
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MR. RAYMOND S. FOTH		Date of Receipt MM / DD / YYYY 09 / 01 / 2010
Mailing Address 16715 W. BELMONT		Transaction ID: SA11.30300
City KERMAN	State CA	Zip Code 93630-9552
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer BRITZ/SIMPLOT	Occupation PEST CONTROL ADVISOR	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) MR. MICHAEL JOHN FOURTICQ		Date of Receipt MM / DD / YYYY 09 / 22 / 2010
Mailing Address 344 S. HUDSON AVENUE		Transaction ID: SA11.45234
City LOS ANGELES	State CA	Zip Code 90020-4804
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15000.00	
Name of Employer HANCOCK PARK ASSOCIATES	Occupation INVESTMENT MANAGEMENT	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

**C.**

Full Name (Last, First, Middle Initial) MR. GREGORY A. FOX		Date of Receipt MM / DD / YYYY 09 / 08 / 2010
Mailing Address 24 UPPER LADUE ROAD		Transaction ID: SA11.36392
City ST. LOUIS	State MO	Zip Code 63124-1675
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2400.00	
Name of Employer HARBOUR GROUP	Occupation EXECUTIVE	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional) .....	17900.00
TOTAL This Period (last page this line number only) .....	

10020734502

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

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

FOR LINE NUMBER: PAGE 140 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. JEFFREY L. FOX

Mailing Address **26 BRENTMOOR PARK**

City **ST. LOUIS** State **MO** Zip Code **63105-3070**

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

Name of Employer **HARBOUR GROUP** Occupation **EXECUTIVE**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **09 / 08 / 2010**  
Transaction ID: SA11.36391  
Amount of Each Receipt this Period **2400.00**  
CONTRIBUTION

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

Mailing Address **23 CAVEWOLD DRIVE**

City **SAINT LOUIS** State **MO** Zip Code **93105**

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 ▼ **2400.00**

Date of Receipt **09 / 09 / 2010**  
Transaction ID: SA11.36453  
Amount of Each Receipt this Period **2400.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MS. DIANNE P. FRANKLIN

Mailing Address **P.O. BOX 1303**

City **BELLA VISTA** State **CA** Zip Code **96008-1303**

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

Name of Employer **FRANKLIN LOGGING, INC.** Occupation **C.E.O.**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **09 / 22 / 2010**  
Transaction ID: SA11.45282  
Amount of Each Receipt this Period **2400.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **7200.00**

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

10020734503



**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 141 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MR. JOHN B. FRANK

Mailing Address 7 OAK KNOLL TERRACE

City PASADENA State CA Zip Code 91106-4534

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

Name of Employer OAKTREE CAPITAL MANAGEMENT Occupation INVESTMENT MANAGEMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 09 / 22 / 2010

Transaction ID: SA11.45226

Amount of Each Receipt this Period 4800.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. KEMPER FREEMAN

Mailing Address 575 BELLEVUE SQUARE

City BELLEVUE State WA Zip Code 98004-5031

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

Name of Employer KEMPER DEVELOPMENT COMPANY Occupation DEVELOPER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 24 / 2010

Transaction ID: SA11.48278

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. RICHARD M. FREEMAN

Mailing Address 1702 BELLA LAGUNA COURT

City ENCINITAS State CA Zip Code 92024-1291

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

Name of Employer SHEPPARD MULLIN Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2010

Transaction ID: SA11.40321

Amount of Each Receipt this Period 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 10050.00

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

1002073430

**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 142 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. MARTIN FRICKE</b>	Date of Receipt MM / DD / YYYY <b>09 / 15 / 2010</b>
Mailing Address <b>8515 COSTA VERDE BLVD. APARTMENT 2190</b>	Transaction ID: <b>SA11.40338</b>
City State Zip Code <b>SAN DIEGO CA 92122-1130</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. ERNIE E. FRIESEN</b>	Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>
Mailing Address <b>677 GLENWOOD DRIVE</b>	Transaction ID: <b>SA11.42707</b>
City State Zip Code <b>YUBA CITY CA 95991-6113</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>BUSINESS OWNER</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. DALE A. FROST</b>	Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>
Mailing Address <b>2960 CAMINO DIABLO SUITE 300</b>	Transaction ID: <b>SA11.42634</b>
City State Zip Code <b>WALNUT CREEK CA 94597-3961</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>OWNER/INVESTOR</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3150.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734505

**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 143 / 582
<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JAMES L. FULLMER**

Mailing Address **1725 S. GROVE AVENUE**

City **ONTARIO** State **CA** Zip Code **91761-4565**

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

Name of Employer **FULLMER CONSTRUCTION** Occupation **PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **09 / 15 / 2010**

Transaction ID: **SA11.40447**

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

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

Mailing Address **25748 BOTTLEBRUSH DRIVE**

City **LOS ANGELES** State **CA** Zip Code **90077**

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

Name of Employer **SYLMARK INC.** Occupation **BUSINESS EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 30 / 2010**

Transaction ID: **SA11.58955**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. LAWRENCE W. FUNKHOUSER**

Mailing Address **620 SAND HILL ROAD #207B**

City **PALO ALTO** State **CA** Zip Code **94304-2088**

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 **09 / 29 / 2010**

Transaction ID: **SA11.50730**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **4400.00**

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

10020734500

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

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

FOR LINE NUMBER: PAGE 144 / 582

(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. STEPHEN B. GADDIS	Date of Receipt MM / DD / YYYY 08 / 26 / 2010
Mailing Address 420 SELBY LANE	Transaction ID: SA11.29490
City State Zip Code ATHERTON CA 94027-4043	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
Name of Employer PACIFIC CHEESE COMPANY, INC.	Occupation BUSINESS MANAGEMENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00
<b>B.</b> Full Name (Last, First, Middle Initial) MRS. SUSAN E. GADDIS	Date of Receipt MM / DD / YYYY 08 / 26 / 2010
Mailing Address 420 SELBY LANE	Transaction ID: SA11.29489
City State Zip Code ATHERTON CA 94027-4043	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00
<b>C.</b> Full Name (Last, First, Middle Initial) MR. CHARLES P. GALLAGHER	Date of Receipt MM / DD / YYYY 09 / 02 / 2010
Mailing Address 880 DELVIN DRIVE	Transaction ID: SA11.33489
City State Zip Code SAINT LOUIS MO 63141-8831	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

1020734307

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

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

FOR LINE NUMBER: PAGE 145 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. JOE GALLIGAN**

Mailing Address **630 N. SAN MATEO DRIVE**

City State Zip Code  
**SAN MATEO CA 94401-2328**

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

Name of Employer Occupation  
**GALLIGAN THOMPSON CPA**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt

**08 / 26 / 2010**

Transaction ID: SA11.29491

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MR. NICOLA GALLUCCIO**

Mailing Address **9 KNOLLWOOD DRIVE**

City State Zip Code  
**GREENWICH CT 06830-4756**

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

Name of Employer Occupation  
**TETON ADVISORS C.E.O.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt

**09 / 22 / 2010**

Transaction ID: SA11.45252

Amount of Each Receipt this Period

**5000.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MRS. TERESA GALLUCCIO**

Mailing Address **9 KNOLLWOOD DRIVE**

City State Zip Code  
**GREENWICH CT 06830-4756**

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 ▼  
**5000.00**

Date of Receipt

**09 / 22 / 2010**

Transaction ID: SA11.45250

Amount of Each Receipt this Period

**5000.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

**10500.00**

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

1002073430

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

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

FOR LINE NUMBER: PAGE 146 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. JIM GANDUGLIA**

Mailing Address **1938 S. MINNEWAWA**

City **FRESNO** State **CA** Zip Code **93727-6038**

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

Name of Employer **GANDUGLIA TRUCKING** Occupation **TRUCK COMPANY OWNER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 10 / 2010**

Transaction ID: **SA11.38964**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MR. CAM L. GARNER**

Mailing Address **P.O. BOX 675866**

City **RANCHO SANTA FE** State **CA** Zip Code **92067-5866**

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 ▼ **500.00**

Date of Receipt **09 / 01 / 2010**

Transaction ID: **SA11.30286**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS. WANDA L. GARNER**

Mailing Address **P.O. BOX 675866**

City **RANCHO SANTA FE** State **CA** Zip Code **92067-5866**

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

Name of Employer **SELF-EMPLOYED** Occupation **THERAPY**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 01 / 2010**

Transaction ID: **SA11.30274**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1500.00**

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

1002073450



**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 148 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL A. GENUARDI</b>	Date of Receipt MM / DD / YYYY <b>09 / 15 / 2010</b>
Mailing Address <b>8543 RUN OF THE KNOLLS</b>	Transaction ID: <b>SA11.40308</b>
City <b>SAN DIEGO</b> State <b>CA</b> Zip Code <b>92127-2547</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. PETER GEREMIA</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>1801 I. STREET</b>	Transaction ID: <b>SA11.50845</b>
City <b>SACRAMENTO</b> State <b>CA</b> Zip Code <b>95811-3000</b>	Amount of Each Receipt this Period <b>5000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HARVEY CONSTRUCTION</b> Occupation <b>CONSTRUCTION</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>5000.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. BARBARA A. GIGLIOTTI</b>	Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
Mailing Address <b>727 STOCKDALE AVENUE</b>	Transaction ID: <b>SA11.49462</b>
City <b>MONONGAHELA</b> State <b>PA</b> Zip Code <b>15063-1717</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>MERIT CONSTRUCTION</b> Occupation <b>EXECUTIVE</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734311



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 582
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. GREG B. GILBERT</b>		Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
Mailing Address <b>1624 FRANKLIN STREET #1001</b>		Transaction ID: <b>SA11.47346</b>
City <b>OAKLAND</b>	State <b>CA</b>	Zip Code <b>94612-2824</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>INFINITY SECURITIES, INC.</b>	Occupation <b>SECURITIES</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. MARK M. GILBERT</b>		Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>
Mailing Address <b>P.O. BOX 2153</b>		Transaction ID: <b>SA11.42750</b>
City <b>GRANITE BAY</b>	State <b>CA</b>	Zip Code <b>95746-2153</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>ENGEO INCORPORATED</b>	Occupation <b>GEOTECHNICAL ENGINEER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. STEVEN GILISON</b>		Date of Receipt MM / DD / YYYY <b>09 / 08 / 2010</b>
Mailing Address <b>609 17TH STREET</b>		Transaction ID: <b>SA11.36436</b>
City <b>SANTA MONICA</b>	State <b>CA</b>	Zip Code <b>90402-3009</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>INTERNET BRANDS INC.</b>	Occupation <b>DIRECTOR</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3150.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734512

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

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

FOR LINE NUMBER: PAGE 150 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MS. SUZANNE GILSON

Mailing Address 609 17TH STREET

City State Zip Code  
SANTA MONICA CA 90402-3009

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 ▼  
2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36437

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. DAVID GILL

Mailing Address P.O. BOX 605

City State Zip Code  
KING CITY CA 93930-0605

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

Name of Employer Occupation  
SELF-EMPLOYED OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
09 / 22 / 2010

Transaction ID: SA11.45259

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. WILLIAM M. GILL

Mailing Address P.O. BOX 158838

City State Zip Code  
NASHVILLE TN 37215-8838

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

Name of Employer Occupation  
SELF-EMPLOYED VOLUNTEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50838

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 5400.00

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

10020734313

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

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

FOR LINE NUMBER: PAGE 151 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MS. NADINE F. GILLMOR		Date of Receipt MM / DD / YYYY 09 / 09 / 2010
Mailing Address 2359 E. WEBER CANYON ROAD		Transaction ID: SA11.38740
City OAKLEY	State UT	Zip Code 84055
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer LONE PINE RANCH	Occupation OWNER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) MR. SAMUEL L. GINN		Date of Receipt MM / DD / YYYY 07 / 30 / 2010
Mailing Address 400 S EL CAMINO REAL STE 1400		Transaction ID: SA11.26323
City SAN MATEO	State CA	Zip Code 94402-1740
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20800.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20800.00	

**C.**

Full Name (Last, First, Middle Initial) MRS. CYNTHIA A. GIUMARRA		Date of Receipt MM / DD / YYYY 08 / 31 / 2010
Mailing Address 15121 SAN DOMINGO PLACE		Transaction ID: SA11.29718
City BAKERSFIELD	State CA	Zip Code 93306-9751
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer CHEVRON	Occupation ATTORNEY	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional) .....	24300.00
TOTAL This Period (last page this line number only) .....	

10020734514

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

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

FOR LINE NUMBER: PAGE 152 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. SALVADORE GIUMARRA

Mailing Address 15121 SAN DOMINGO PLACE

City BAKERSFIELD State CA Zip Code 93306-9751

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

Name of Employer GIUMARRA VINEYARDS CORPORATION Occupation FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY 08 / 31 / 2010  
Transaction ID: SA11.29768  
Amount of Each Receipt this Period 2500.00  
CONTRIBUTION

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

Mailing Address 55 PECKHAM ROAD

City WATSONVILLE State CA Zip Code 95076-8632

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

Name of Employer GIZDICH STRAWBERRIES Occupation OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY 09 / 02 / 2010  
Transaction ID: SA11.33522  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

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

Mailing Address P.O. BOX 3524

City CHICO State CA Zip Code 95927-3524

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY 08 / 26 / 2010  
Transaction ID: SA11.29406  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3250.00

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

11002074113

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 153 / 582
	(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. RODGER GLASPEY	Date of Receipt MM / DD / YYYY 08 / 31 / 2010
	Mailing Address 1424 E. FOREST OAKS DRIVE	Transaction ID: SA11.29763
	City State Zip Code FRESNO CA 93730-3443	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer Occupation ALLENBERG COTTON COMPANY COTTON MERCHANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. RODGER GLASPEY	Date of Receipt MM / DD / YYYY 08 / 31 / 2010
	Mailing Address 1424 E. FOREST OAKS DRIVE	Transaction ID: SA11.39926
	City State Zip Code FRESNO CA 93730-3443	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer Occupation ALLENBERG COTTON COMPANY COTTON MERCHANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5500.00	<b>IN-KIND: EVENT ENTERTAINMENT</b>

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. RODGER GLASPEY	Date of Receipt MM / DD / YYYY 08 / 31 / 2010
	Mailing Address 1424 E. FOREST OAKS DRIVE	Transaction ID: SA11.59665
	City State Zip Code FRESNO CA 93730-3443	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer Occupation ALLENBERG COTTON COMPANY COTTON MERCHANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5500.00	<b>IN-KIND: SOUND</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

11002073431

**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 154 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MRS. TERRY GLASPEY</b>	Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
	Mailing Address <b>1424 E. FOREST OAKS DRIVE</b>	Transaction ID: <b>SA11.29735</b>
	City <b>FRESNO</b> State <b>CA</b> Zip Code <b>93730-3443</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MRS. DOROTHY GLOVER</b>	Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
	Mailing Address <b>87240 TIPTON ROAD</b>	Transaction ID: <b>SA11.49463</b>
	City <b>JEWETT</b> State <b>OH</b> Zip Code <b>43986-9529</b>	Amount of Each Receipt this Period <b>400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>DFG EXCAVATING INC.</b>	Occupation <b>PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>400.00</b>	

<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. HOWARD GOLDFEDER</b>	Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
	Mailing Address <b>P.O. BOX 41</b>	Transaction ID: <b>SA11.58929</b>
	City <b>RANCHO SANTA FE</b> State <b>CA</b> Zip Code <b>92067-0041</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734517

**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 155 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. RICHARD JAY GOLDSTEIN</b>		Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>67 CREST ROAD E.</b>		Transaction ID: <b>SA11.39352</b>
City <b>ROLLING HILLS</b>	State <b>CA</b>	Zip Code <b>90274-5264</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>OAKTREE CAPITAL</b>	Occupation <b>MONEY MANAGER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. KELLY GOOD</b>		Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>13961 WOODROSE COURT</b>		Transaction ID: <b>SA11.39400</b>
City <b>CHINO HILLS</b>	State <b>CA</b>	Zip Code <b>91709-5930</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>300.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>HEALTH INSURANCE</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>300.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. MARJORIE GORBY</b>		Date of Receipt MM / DD / YYYY <b>08 / 24 / 2010</b>
Mailing Address <b>525 N. BELLAGIO TERRACE</b>		Transaction ID: <b>SA11.28213</b>
City <b>LOS ANGELES</b>	State <b>CA</b>	Zip Code <b>90049-1708</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2950.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

11 10 09 08 07 06 05 04 03 02 01

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

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

FOR LINE NUMBER: PAGE 156 / 582  
(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)  
CARLY VICTORY COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
MRS. MICHELE DU P. GOSS

Mailing Address 2545 DIVISADERO STREET

City SAN FRANCISCO State CA Zip Code 94115-1119

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 ▼ 15000.00

Date of Receipt 08 / 31 / 2010

Transaction ID: SA11.29756

Amount of Each Receipt this Period 15000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. JAY S. GOULD

Mailing Address 9 CHEROKEE TRAIL

City ELKVIEW State WV Zip Code 25071-9263

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

Name of Employer GOULD ELECTRIC MOTOR REPAIR Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 09 / 27 / 2010

Transaction ID: SA11.49464

Amount of Each Receipt this Period 20000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MRS. ANA GRAGNANI

Mailing Address P.O. BOX 621

City TRANQUILLITY State CA Zip Code 93668-0621

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 03 / 2010

Transaction ID: SA11.33583

Amount of Each Receipt this Period 1200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 36200.00

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

10020734513



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

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

FOR LINE NUMBER: PAGE 157 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. JERRY GRAGNANI		Date of Receipt MM / DD / YYYY 09 / 03 / 2010		
	Mailing Address P.O. BOX 621		Transaction ID: SA11.33595		
	City TRANQUILLITY	State CA	Zip Code 93668-0621	Amount of Each Receipt this Period 1200.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer GRAGNANI FARMS		Occupation FARMER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00			
<b>B.</b>	Full Name (Last, First, Middle Initial) MRS. LISA GRAGNANI		Date of Receipt MM / DD / YYYY 08 / 25 / 2010		
	Mailing Address P.O. BOX 187		Transaction ID: SA11.28224		
	City TRANQUILLITY	State CA	Zip Code 93668-0187	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer MICHAEL GRAGNANI FARMS		Occupation SELF-FARMER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			
<b>C.</b>	Full Name (Last, First, Middle Initial) MR. MICHAEL GRAGNANI		Date of Receipt MM / DD / YYYY 08 / 25 / 2010		
	Mailing Address P.O. BOX 187		Transaction ID: SA11.28225		
	City TRANQUILLITY	State CA	Zip Code 93668-0187	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer MICHAEL GRAGNANI FARMS		Occupation FARMING			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (optional) .....			2200.00		
TOTAL This Period (last page this line number only) .....					

120020734520

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

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

FOR LINE NUMBER: PAGE 158 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**DR. JAY D. GRASSELL**

Mailing Address **861 MURRAY COURT**

City **YUBA CITY** State **CA** Zip Code **95991-6121**

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

Name of Employer **SELF** Occupation **PHYSICIAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 09 / 2010**

Transaction ID: **SA11.38690**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MR. JOHN S. GRASSI**

Mailing Address **3580 WASHINGTON STREET**

City **SAN FRANCISCO** State **CA** Zip Code **94118-1849**

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

Name of Employer **SPEARS STREET CAPITAL** Occupation **REAL ESTATE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt **09 / 22 / 2010**

Transaction ID: **SA11.45260**

Amount of Each Receipt this Period **2000.00**

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS. STEPHANIE GREEN**

Mailing Address **51 EAST LOOP**

City **MADERA** State **CA** Zip Code **93637-4946**

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

Name of Employer **U.S. RACK, INC** Occupation **SELF-EMPLOYED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 09 / 2010**

Transaction ID: **SA11.38671**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3500.00**

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

10020734521

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

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

FOR LINE NUMBER: PAGE 159 / 582  
(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)  
CARLY VICTORY COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. JOSEPH GREGORIO	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 16 EASTFIELD ROAD	Transaction ID: SA11.58956
	City State Zip Code ROLLING HILLS CA 90274-5261	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer PACIFIC CRANE	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	
<b>B.</b>	Full Name (Last, First, Middle Initial) MRS. LAURA K. GREGORIO	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 16 EASTFIELD ROAD	Transaction ID: SA11.58957
	City State Zip Code ROLLING HILLS CA 90274-5261	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer KELLER WILLIAMS	Occupation REAL ESTATE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	
<b>C.</b>	Full Name (Last, First, Middle Initial) MR. MARK GREWAL	Date of Receipt MM / DD / YYYY 09 / 01 / 2010
	Mailing Address 564 PHILAN CIRCLE	Transaction ID: SA11.30281
	City State Zip Code LEMOORE CA 93245-9697	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer GREWAL CONSULTING	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		5800.00
<b>TOTAL</b> This Period (last page this line number only) .....		

10020734522

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

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

FOR LINE NUMBER: PAGE 160 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. JOHN R. GREY Mailing Address 100 THORNDALE DRIVE #112 City State Zip Code SAN RAFAEL CA 94903-4547 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 29 / 2010 Transaction ID: SA11.50665 Amount of Each Receipt this Period 250.00 <b>CONTRIBUTION</b>	
	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	
	Full Name (Last, First, Middle Initial) MRS. MARGARET S. GREY Mailing Address 100 THORNDALE DRIVE #112 City State Zip Code SAN RAFAEL CA 94903-4547 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 29 / 2010 Transaction ID: SA11.50606 Amount of Each Receipt this Period 250.00 <b>CONTRIBUTION</b>
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS 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) MR. ANTHONY GRILLO Mailing Address 299 PARK AVENUE City State Zip Code NEW YORK CITY NY 07976 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 24 / 2010 Transaction ID: SA11.48332 Amount of Each Receipt this Period 1000.00 <b>CONTRIBUTION</b>	
	Name of Employer Occupation AMERICAN SECURITIES ADVISORS L.L.C. PRIVATE EQUITY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 1000.00	
	SUBTOTAL of Receipts This Page (optional) ..... ▶	1500.00
	TOTAL This Period (last page this line number only) ..... ▶	[ ]

1002074423

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

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

FOR LINE NUMBER: PAGE 161 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MS. BARBARA GRIMM-MARSHALL**

Mailing Address **7158 BUENA VISTA ROAD**

City **BAKERSFIELD** State **CA** Zip Code **93311-9425**

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

Name of Employer **GRIMMWAY FARMS** Occupation **FARMER/BUSINESS OWNER**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **32800.00**

Date of Receipt **09 / 03 / 2010**  
 Transaction ID: **SA11.33558**  
 Amount of Each Receipt this Period **32800.00**  
**CONTRIBUTION**

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

Mailing Address **1130 RALEIGH CHAPEL ROAD**

City **RALEIGH** State **IL** Zip Code **62977-1359**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 29 / 2010**  
 Transaction ID: **SA11.50794**  
 Amount of Each Receipt this Period **500.00**  
**CONTRIBUTION**

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

Mailing Address **3435 E. SOUTH BEAR CREEK DRIVE**

City **MERCED** State **CA** Zip Code **95340-9453**

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

Name of Employer **KENNETH GROEFSEMA RANCH** Occupation **OWNER**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 21 / 2010**  
 Transaction ID: **SA11.44119**  
 Amount of Each Receipt this Period **500.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **33800.00**

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

10020734324

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

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

FOR LINE NUMBER: PAGE 162 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MS. APRIL GRUBER

Mailing Address 2137 PACIFIC

City State Zip Code  
**SAN FRANCISCO CA 94115-1545**

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

Name of Employer H.K.S. Occupation **ARCHITECT**

Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1000.00**

Date of Receipt **09 / 17 / 2010**

Transaction ID: SA11.43492

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MRS. GLORIA L. GRUBER

Mailing Address 37 BELLEVUE AVENUE

City State Zip Code  
**PIEDMONT CA 94611-3501**

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

Name of Employer SELF-EMPLOYED Occupation **ATTORNEY**

Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **2400.00**

Date of Receipt **08 / 30 / 2010**

Transaction ID: SA11.29663

Amount of Each Receipt this Period **2400.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. JUSTIN C. GUICHARD

Mailing Address 3307 N. POINSETTA AVENUE

City State Zip Code  
**MANHATTAN BEACH CA 90266-3537**

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

Name of Employer OAKTREE CAPITAL Occupation **INVESTMENT MANAGEMENT**

Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **250.00**

Date of Receipt **09 / 22 / 2010**

Transaction ID: SA11.45245

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) **3650.00**

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

1309207154124

**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 163 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MRS. KIMBERLY M. GUICHARD		Date of Receipt MM / DD / YYYY 09 / 22 / 2010
Mailing Address 3307 N. POINSETTA AVENUE		Transaction ID: SA11.45243
City MANHATTAN BEACH	State CA	Zip Code 90266-3537
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer SELF-EMPLOYED	Occupation BOOKKEEPER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**B.**

Full Name (Last, First, Middle Initial) MR. DEAN PAUL GUNDERSON		Date of Receipt MM / DD / YYYY 09 / 22 / 2010
Mailing Address 215 TANGLEWOOD DRIVE		Transaction ID: SA11.45261
City RICHMOND	State CA	Zip Code 94806-5815
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1200.00	
Name of Employer RUTHERFORD INVESTMENTS	Occupation PARTNER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

**C.**

Full Name (Last, First, Middle Initial) MR. ERIC P. GUSTAVSON		Date of Receipt MM / DD / YYYY 09 / 15 / 2010
Mailing Address 3657 CROSS CREEK ROAD		Transaction ID: SA11.40328
City MALIBU	State CA	Zip Code 90265-4929
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2400.00	
Name of Employer SPENDTHRIFT STALLIONS	Occupation OWNER/MANAGER HORSE BREEDER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional) .....	3850.00
TOTAL This Period (last page this line number only) .....	

10020734525

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

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

FOR LINE NUMBER: PAGE 164 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MRS. TAMARA H. GUSTAVSON

Mailing Address 3657 CROSS CREEK ROAD

City MALIBU State CA Zip Code 90265-4929

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

Name of Employer MALIBU MANAGEMENT INC. Occupation INVESTOR/REAL ESTATE MANAGEMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt MM / DD / YYYY  
09 / 15 / 2010

Transaction ID: SA11.40327

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MRS. MARY JUANITA GUTIERREZ

Mailing Address 331 DARRELL ROAD

City HILLSBOROUGH State CA Zip Code 94010-6763

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 ▼ 5000.00

Date of Receipt MM / DD / YYYY  
09 / 01 / 2010

Transaction ID: SA11.30367

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. MAX GUTIERREZ, JR.

Mailing Address 331 DARRELL ROAD

City HILLSBOROUGH State CA Zip Code 94010-6763

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

Name of Employer MORGAN, LEWIS & BOCKIUS, L.L.P. Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
09 / 01 / 2010

Transaction ID: SA11.30376

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 12400.00

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

10020734327



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 165 / 582</span>
(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. PAUL G. HAAGA	Date of Receipt MM / DD / YYYY 08 / 19 / 2010
	Mailing Address 1743 FAIRMONT AVENUE	Transaction ID: SA11.27664
	City State Zip Code LA CANADA FLINTRID CA 91011-1633	Amount of Each Receipt this Period 15000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer CAPITAL RESEARCH & MANAGEMENT	Occupation VICE CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MS. JULIE HAAS	Date of Receipt MM / DD / YYYY 09 / 21 / 2010
	Mailing Address 33 SPRUCE STREET	Transaction ID: SA11.44121
	City State Zip Code SAN FRANCISCO CA 94118-1824	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer SELF-EMPLOYED	Occupation DESIGNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. HOWARD HABERMAN	Date of Receipt MM / DD / YYYY 09 / 17 / 2010
	Mailing Address 630 DOUGLAS STREET	Transaction ID: SA11.43483
	City State Zip Code SAN FRANCISCO CA 94114-3141	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer HOWARD M. HABERMAN ASSOCIATES INC.	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	17200.00
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734323

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

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

FOR LINE NUMBER: PAGE 166 / 582  
(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

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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**TRACIE HABER**

Mailing Address **1514 10TH STREET**

City **MANHATTAN BEACH** State **CA** Zip Code **90266-6104**

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 ▼ **1000.00**

Date of Receipt **09 / 03 / 2010**

Transaction ID: **SA11.33567**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MR. DAVID H. HAGERMAN**

Mailing Address **PIER 39  
SPACE L11**

City **SAN FRANCISCO** State **CA** Zip Code **94133**

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

Name of Employer **SELF-EMPLOYED** Occupation **RETAILER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 10 / 2010**

Transaction ID: **SA11.38984**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**MR. EARL HALL**

Mailing Address **759 S. MADERA AVENUE**

City **KERMAN** State **CA** Zip Code **93630-1744**

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

Name of Employer **E. E. HALL INC.** Occupation **PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 08 / 2010**

Transaction ID: **SA11.36380**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2500.00**

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

10020734323

**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 167 / 582							
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MAYOR HARVEY L. HALL</b>		Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
Mailing Address <b>1001 21ST STREET</b>		Transaction ID: <b>SA11.38727</b>
City <b>BAKERSFIELD</b>	State <b>CA</b>	Zip Code <b>93301-4708</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>HALL AMBULANCE SERVICE</b>	Occupation <b>CEO</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. JOSEPH C.M. HALL</b>		Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>550 KEARNY STREET SUITE 515</b>		Transaction ID: <b>SA11.50607</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94108-2595</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>PRIVATE INVESTOR</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL R. HALLMAN</b>		Date of Receipt MM / DD / YYYY <b>09 / 24 / 2010</b>
Mailing Address <b>15702 NE 135TH STREET</b>		Transaction ID: <b>SA11.48297</b>
City <b>REDMOND</b>	State <b>WA</b>	Zip Code <b>98052-1756</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>4800.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>CONSULTANT</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>4800.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5550.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734530

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

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

FOR LINE NUMBER: PAGE 168 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
BROOKE A. HAMILTON

Mailing Address 7119 N. MARTY AVENUE

City State Zip Code  
FRESNO CA 93711-0670

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
MEYERS FARMING PARTNER/FARMER

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 1000.00

Date of Receipt

MM / DD / YYYY  
08 / 31 / 2010

Transaction ID: SA11.29733

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
BROOKE A. HAMILTON

Mailing Address 7119 N. MARTY AVENUE

City State Zip Code  
FRESNO CA 93711-0670

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
MEYERS FARMING PARTNER/FARMER

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 1000.00

Date of Receipt

MM / DD / YYYY  
08 / 31 / 2010

Transaction ID: SA11.29762

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
DR. VINCENT D. HAMILTON

Mailing Address 1525 PLUMAS COURT #D

City State Zip Code  
YUBA CITY CA 95991-2971

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
SELF-EMPLOYED SURGERY

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 250.00

Date of Receipt

MM / DD / YYYY  
09 / 10 / 2010

Transaction ID: SA11.38965

Amount of Each Receipt this Period

250.00

CONTRIBUTION

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

1250.00

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

1302071431

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

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

FOR LINE NUMBER: PAGE 169 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MR. WILLIAM D. HAMILTON  
Mailing Address P.O. BOX 111

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2010

City State Zip Code  
FAIRPOINT OH 43927-0111

Transaction ID: SA11.49470

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period  
CONTRIBUTION  
400.00

Name of Employer  
BH & S CONSTRUCTION COMPA-  
NY INC

Occupation  
OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

B.

Full Name (Last, First, Middle Initial)  
MR. CHARLES HAMMOND  
Mailing Address 13 GLEN HOLLOW ROAD

Date of Receipt  
MM / DD / YYYY  
08 / 25 / 2010

City State Zip Code  
DANVILLE CA 94506-1916

Transaction ID: SA11.28226

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period  
CONTRIBUTION  
500.00

Name of Employer  
ENTERPRISE HOLDINGS

Occupation  
EXECUTIVE VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

C.

Full Name (Last, First, Middle Initial)  
MRS. DIANE M. HAMMOND  
Mailing Address 2440 W. BORDER LINKS DRIVE

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

City State Zip Code  
VISALIA CA 93291-4316

Transaction ID: SA11.42752

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period  
CONTRIBUTION  
250.00

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

SUBTOTAL of Receipts This Page (optional) ▶

1150.00

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

10020714332

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

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

FOR LINE NUMBER: PAGE 170 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) MR. PHILIP R. HAMMOND	Date of Receipt MM / DD / YYYY 09 / 16 / 2010
	Mailing Address 2440 W. BORDER LINKS DRIVE	Transaction ID: SA11.42763
	City State Zip Code VISALIA CA 93291-4316	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF EMPLOYED	Occupation FARMER
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
B.	Full Name (Last, First, Middle Initial) MR. BOB HAMPTON	Date of Receipt MM / DD / YYYY 08 / 19 / 2010
	Mailing Address P.O. BOX 104	Transaction ID: SA11.27665
	City State Zip Code TAFT CA 93268-8104	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer WESTSIDE WASTE MANAGEMENT	Occupation OWNER
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00
C.	Full Name (Last, First, Middle Initial) MR. GEORGE PAUL HAMPTON	Date of Receipt MM / DD / YYYY 09 / 14 / 2010
	Mailing Address 346 WEST BOURNE STREET	Transaction ID: SA11.39571
	City State Zip Code LA JOLLA CA 92037-5345	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer GLOBAL VILLAGE CONCERNS	Occupation C.E.O.
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00
SUBTOTAL of Receipts This Page (optional) .....		3150.00
TOTAL This Period (last page this line number only) .....		

1002073453

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

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

FOR LINE NUMBER: PAGE 171 / 582  
(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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
AJAY HANDA

Mailing Address 30807 MARNE DRIVE

City Rancho Palos Verde State CA Zip Code 90275-5609

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

Name of Employer COLUMBUS TECHNOLOGIES Occupation C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 09 / 30 / 2010  
Transaction ID: SA11.58744  
Amount of Each Receipt this Period 2400.00  
CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MRS. REVA HANDA

Mailing Address 30807 MARNE DRIVE

City Rancho Palos Verde State CA Zip Code 90275-5609

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 09 / 30 / 2010  
Transaction ID: SA11.58737  
Amount of Each Receipt this Period 2400.00  
CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. DENNIS O. HANDEL

Mailing Address 5105 SOUTHSORE DRIVE

City Bakersfield State CA Zip Code 93312-1926

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

Name of Employer RIVERLAKES RANCH MASTER ASSOCIATION Occupation DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 16 / 2010  
Transaction ID: SA11.42709  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 5300.00

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

1002073433A

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

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

FOR LINE NUMBER: PAGE 172 / 582  
(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)  
CARLY VICTORY COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
MRS. JANICE HANDEL

Mailing Address 5105 SOUTHSORE DRIVE

City BAKERSFIELD State CA Zip Code 93312-1926

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 ▼ 500.00

Date of Receipt 09 / 16 / 2010

Transaction ID: SA11.42724

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. SCOTT HANEY

Mailing Address 1903 PINE STREET

City ELDORADO State IL Zip Code 62930-2144

FEC ID number of contributing federal political committee. C

Name of Employer MURRAY ENERGY Occupation COAL MINER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 09 / 27 / 2010

Transaction ID: SA11.49473

Amount of Each Receipt this Period 290.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. DAVID HANNA

Mailing Address 8105 IRVINE CENTER DRIVE #1170

City IRVINE State CA Zip Code 92618-4932

FEC ID number of contributing federal political committee. C

Name of Employer HANNA VENTURES Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 28000.00

Date of Receipt 08 / 19 / 2010

Transaction ID: SA11.27659

Amount of Each Receipt this Period 28000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 28790.00

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

10020741



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

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

FOR LINE NUMBER: PAGE 173 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. EDWIN JAMES HANNAY**

Mailing Address **97 TUSCALOOSA AVENUE**

City **ATHERTON** State **CA** Zip Code **94027-4014**

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

Name of Employer **RECTOR PORSCHE AUDI** Occupation **AUTOMOBILE DEALER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 10 / 2010**  
Transaction ID: SA11.38977  
Amount of Each Receipt this Period **1000.00**  
CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MRS. MARSHA HAYNES HANNAY**

Mailing Address **97 TUSCALOOSA AVENUE**

City **ATHERTON** State **CA** Zip Code **94027-4014**

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 ▼ **1000.00**

Date of Receipt **09 / 10 / 2010**  
Transaction ID: SA11.38972  
Amount of Each Receipt this Period **1000.00**  
CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MRS. VIRGINIA L. HANNA**

Mailing Address **8105 IRVINE CENTER DRIVE #1170**

City **IRVINE** State **CA** Zip Code **92618-4932**

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

Name of Employer **HANNA CAPITAL MANAGEMENT** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **08 / 19 / 2010**  
Transaction ID: SA11.27660  
Amount of Each Receipt this Period **2400.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **4400.00**

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

1002073431

**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 174 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. RANDY J. HANNER

Mailing Address 1410 DAYBREAK DRIVE

City HANSON State KY Zip Code 42413-9643

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

Name of Employer HANNER MACHINE COMPANY INC. Occupation COAL INDUSTRY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 29 / 2010  
Transaction ID: SA11.50644  
Amount of Each Receipt this Period 700.00  
CONTRIBUTION

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

Mailing Address 2101 HUNT CLUB DRIVE

City GREENSBURG State PA Zip Code 15601-8422

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

Name of Employer HARBAUGH POWER PRODUCTS Occupation VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2010  
Transaction ID: SA11.49475  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. JOHN DAVID HARDIE

Mailing Address 4701 WINDSOR RIDGE DRIVE

City IRVING State TX Zip Code 75038-6316

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 ▼ 250.00

Date of Receipt 09 / 10 / 2010  
Transaction ID: SA11.38937  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... 1450.00

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

1002074437

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

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

FOR LINE NUMBER: PAGE 175 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>GINA HARNEY</b>		Date of Receipt MM / DD / YYYY <b>09 / 07 / 2010</b>	
Mailing Address <b>15 LONG VIEW WAY</b>		Transaction ID: <b>SA11.35518</b>	
City <b>GEORGETOWN</b>	State <b>MA</b>	Zip Code <b>01833-2230</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>YMCA OF THE NORTH SHORE</b>	Occupation <b>CONTROLLER</b>	Aggregate Year-to-Date <b>250.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) <b>MS. JACKLYN M. HARPER</b>		Date of Receipt MM / DD / YYYY <b>09 / 24 / 2010</b>	
Mailing Address <b>3079 RED SPRINGS DRIVE</b>		Transaction ID: <b>SA11.48338</b>	
City <b>LAS VEGAS</b>	State <b>NV</b>	Zip Code <b>89135-1549</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. CAROLE HARRIS</b>		Date of Receipt MM / DD / YYYY <b>09 / 24 / 2010</b>	
Mailing Address <b>20115 E. TRIMMER SPRINGS ROAD</b>		Transaction ID: <b>SA11.48344</b>	
City <b>SANGER</b>	State <b>CA</b>	Zip Code <b>93657-9006</b>	Amount of Each Receipt this Period <b>2000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>HARRIS FARMS INC.</b>	Occupation <b>OWNER</b>	Aggregate Year-to-Date <b>2000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

11  
10  
09  
08  
07  
06  
05  
04  
03  
02  
01

**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 176 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MRS. PAT HARRIS</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>10624 MIDWAY AVENUE</b>	Transaction ID: <b>SA11.50844</b>
City <b>CERRITOS</b> State <b>CA</b> Zip Code <b>90703-1522</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. RON HARRIS</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>10624 MIDWAY AVENUE</b>	Transaction ID: <b>SA11.50869</b>
City <b>CERRITOS</b> State <b>CA</b> Zip Code <b>90703-1522</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MS. CAROL HARTMAN</b>	Date of Receipt MM / DD / YYYY <b>09 / 20 / 2010</b>
Mailing Address <b>915 UUANITA DRIVE</b>	Transaction ID: <b>SA11.43559</b>
City <b>WALNUT CREEK</b> State <b>CA</b> Zip Code <b>94595</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>CALDWELL PARTNERS</b>	Occupation <b>PARTNER</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

13002073330

**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 177 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MRS. JEANNE W. HASKELL</b>		Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
Mailing Address <b>6916 CODORNIZ ROAD</b>		Transaction ID: <b>SA11.38986</b>
City <b>COLUSA</b> State <b>CA</b> Zip Code <b>95932-4016</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>	
Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>FARMER</b>	Aggregate Year-to-Date <b>250.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) <b>MR. RILEY E. HASKELL</b>		Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
Mailing Address <b>6916 CODORNIZ ROAD</b>		Transaction ID: <b>SA11.38992</b>
City <b>COLUSA</b> State <b>CA</b> Zip Code <b>95932-4016</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>	
Name of Employer <b>BAKER CREEK FARMING</b> Occupation <b>FARMER</b>	Aggregate Year-to-Date <b>250.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. DEBRA HAWKEY</b>		Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
Mailing Address <b>RR 1 BOX 37A</b>		Transaction ID: <b>SA11.49111</b>
City <b>SAINT PETER</b> State <b>IL</b> Zip Code <b>62880-9713</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>	
Name of Employer <b>HAWKEY &amp; KLINE DRILLING</b> Occupation <b>DRILLERS</b>	Aggregate Year-to-Date <b>250.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

100207104540

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

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

FOR LINE NUMBER: PAGE 178 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
DR. B. LEE HAWKINS, JR.

Mailing Address 4710 JIM HOOD ROAD

City State Zip Code  
GAINESVILLE GA 30506-2832

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

Name of Employer SELF-EMPLOYED Occupation DENTIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2010

Transaction ID: SA11.49479

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MRS. MICHELE L. HAY

Mailing Address 1160 EDMUND STREET

City State Zip Code  
BAKERSFIELD CA 93309-2402

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 ▼  
500.00

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

Transaction ID: SA11.38669

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MS. LYNNETTE M. HAYDE

Mailing Address 27 CROOKED STICK DRIVE

City State Zip Code  
NEWPORT BEACH CA 92660-4285

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

Name of Employer C. COLOR Occupation CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15200.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2010

Transaction ID: SA11.26290

Amount of Each Receipt this Period  
15200.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 16700.00

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

10020734341

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

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

FOR LINE NUMBER: PAGE 179 / 582  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MR. MICHAEL K. HAYDE

Mailing Address 27 CROOKED STICK DRIVE

City State Zip Code  
NEWPORT BEACH CA 92660-4285

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

Name of Employer Occupation  
WESTERN NATIONAL GROUP EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15200.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2010

Transaction ID: SA11.26289

Amount of Each Receipt this Period  
15200.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. RUFUS L. HAYDEN

Mailing Address 508 N. HIDALGO AVENUE

City State Zip Code  
ALHAMBRA CA 91801-2642

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

Name of Employer Occupation  
SELF-EMPLOYED PERSONAL INVESTMENTS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50733

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. DANIEL M. HAYES

Mailing Address 22430 SE 231ST STREET

City State Zip Code  
MAPLE VALLEY WA 98038-8272

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

Name of Employer Occupation  
J. R. HAYES & SONS, INC. C.E.O.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

Transaction ID: SA11.48279

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 18600.00

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

10020734342

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

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

FOR LINE NUMBER: PAGE 180 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) MRS. BARBARA J. HAYS	Date of Receipt MM / DD / YYYY 09 / 02 / 2010
	Mailing Address 5460 QUAIL WAY	Transaction ID: SA11.33481
	City State Zip Code CARMEL CA 93923-7933	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
<b>B.</b>	Full Name (Last, First, Middle Initial) DR. PAUL HAZELRIG	Date of Receipt MM / DD / YYYY 09 / 29 / 2010
	Mailing Address 423 EL CENTRO	Transaction ID: SA11.50721
	City State Zip Code HILLSBOROUGH CA 94010-6672	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer SAN MATEO ORTHOPEDIC	Occupation SURGEON	
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) MR. KAYE B. HEAFEY	Date of Receipt MM / DD / YYYY 09 / 23 / 2010
	Mailing Address 17 LINCOLNSHIRE DRIVE	Transaction ID: SA11.47360
	City State Zip Code OAKLAND CA 94618-1725	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer SELF-EMPLOYED	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		2250.00
<b>TOTAL</b> This Period (last page this line number only) .....		

10020734343



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 181 / 582
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. GREG HECKMAN

Mailing Address 840 MERIDIAN ROAD

City MERIDIAN State CA Zip Code 95957-9651

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

Name of Employer UMPQUA BANK Occupation BANKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2010  
Transaction ID: SA11.43489  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MRS. JANE A. HEIDELBACH

Mailing Address 135 TNI LANE

City ST CLAIRSVILLE State OH Zip Code 43950-1573

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

Name of Employer MURRAY ENERGY CORP Occupation COAL MINER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2010  
Transaction ID: SA11.49478  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. CLIFFORD S. HEINZ

Mailing Address 3 SAN JOAQUIN PLAZA SUITE 170

City NEWPORT BEACH State CA Zip Code 92660-5945

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 ▼ 2500.00

Date of Receipt 08 / 27 / 2010  
Transaction ID: SA11.29532  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1500.00

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

11092071415

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 182 / 582
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MR. CLIFFORD S. HEINZ		Date of Receipt
Mailing Address 3 SAN JOAQUIN PLAZA SUITE 170		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
City	State	Zip Code
NEWPORT BEACH	CA	92660-5945
FEC ID number of contributing federal political committee.		Transaction ID: SA11.47331
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer RETIRED		CONTRIBUTION
Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="2500.00"/>

**B.**

Full Name (Last, First, Middle Initial) MR. CLIFFORD S. HEINZ		Date of Receipt
Mailing Address 3 SAN JOAQUIN PLAZA SUITE 170		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
City	State	Zip Code
NEWPORT BEACH	CA	92660-5945
FEC ID number of contributing federal political committee.		Transaction ID: SA11.49283
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer RETIRED		CONTRIBUTION
Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="2500.00"/>

**C.**

Full Name (Last, First, Middle Initial) MR. STEVEN E. HELLER		Date of Receipt
Mailing Address 961 COMMERCIAL STREET		<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
City	State	Zip Code
SAN CARLOS	CA	94070-4031
FEC ID number of contributing federal political committee.		Transaction ID: SA11.38969
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer H. Y. FLOOR & GAME LINE PAINTING, INC.		CONTRIBUTION
Occupation PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="1000.00"/>

SUBTOTAL of Receipts This Page (optional) .....	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only) .....	<input type="text"/>

10020734543

**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 183 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. SUSAN HELLER

Mailing Address 961 COMMERCIAL STREET

City State Zip Code  
SAN CARLOS CA 94070-4031

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

Name of Employer  
H. Y. FLOOR & GAME LINE PAINTING

Occupation  
VICE PRESIDENT

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

Transaction ID: SA11.38939

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. BRIAN M. HENDERSHOT

Mailing Address 318 BUCKEYE STREET

City State Zip Code  
POWHATAN POINT OH 43942-1364

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

Name of Employer  
OHIO-WEST VIRGINIA EXCAVATING CO.

Occupation  
CONSTRUCTION

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2010

Transaction ID: SA11.49077

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. WILLIAM RANDALL HENDERSHOT

Mailing Address 201 NUNZIA COURT

City State Zip Code  
ROSEVILLE CA 95661-3979

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

Name of Employer  
ENTERPRISE HOLDINGS

Occupation  
REGIONAL VICE PRESIDENT

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58734

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1750.00**

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

10020734445



**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 185 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. LESTER HERINGER

Mailing Address 3962 CHICO RIVER ROAD

City CHICO State CA Zip Code 95928-9633

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

Name of Employer M. & T. Occupation FARM MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 10 / 2010

Transaction ID: SA11.38930

Amount of Each Receipt this Period 250.00

CONTRIBUTION

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

Mailing Address 2985 AIRPORT DRIVE

City MADERA State CA Zip Code 93637-9288

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

Name of Employer THE SPECIALTY CROP COMPANY Occupation FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2010

Transaction ID: SA11.29731

Amount of Each Receipt this Period 500.00

CONTRIBUTION

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

Mailing Address 2985 AIRPORT DRIVE

City MADERA State CA Zip Code 93637-9288

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

Name of Employer THE SPECIALTY CROP COMPANY Occupation FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2010

Transaction ID: SA11.29761

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1250.00

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

10020711

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

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

FOR LINE NUMBER: PAGE 186 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
MRS. EMILY HERNANDEZ

Mailing Address 1276 MEADOW WOOD PLACE

City ENCINITAS State CA Zip Code 92024-5649

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

Name of Employer UCSD Occupation DIRECTOR OF DEVELOPMENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date 250.00

Date of Receipt 09 / 13 / 2010  
Transaction ID: SA11.39396  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. THOMAS L. HERNANDEZ

Mailing Address 1276 MEADOW WOOD PLACE

City ENCINITAS State CA Zip Code 92024-5649

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

Name of Employer DEFENSE CONNCTIONS Occupation PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date 250.00

Date of Receipt 09 / 13 / 2010  
Transaction ID: SA11.39415  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. PETER F. HERSCHEND

Mailing Address 538 OAK BLUFF ROAD

City BRANSON State MO Zip Code 65616-9110

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

Name of Employer HERSCHEND FAMILY ENTERTAINMENT Occupation CO-FOUNDER/OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date 2400.00

Date of Receipt 09 / 10 / 2010  
Transaction ID: SA11.38945  
Amount of Each Receipt this Period 2400.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 2900.00

TOTAL This Period (last page this line number only)

13  
14  
15  
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**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 187 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MR. DAVID HIBBS

Mailing Address 104 WEST 250 SOUTH  
APARTMENT C.

City Wellington State UT Zip Code 84542-9406

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

Name of Employer UTAH AMERICAN ENERGY INC. Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt 09 / 27 / 2010  
Transaction ID: SA11.49080  
Amount of Each Receipt this Period 490.00  
CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. DOUGLAS E. HIBBS

Mailing Address 2022 GLENMARK AVENUE

City MORGANTOWN State WV Zip Code 26505-2900

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

Name of Employer HYDRA TOOLS INTERNATIONAL Occupation COMPANY PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2010  
Transaction ID: SA11.49079  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. ROBERT A. HIGH

Mailing Address 3201 PAPILLON COURT

City MODESTO State CA Zip Code 95356-9307

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

Name of Employer HIGH RANCHING Occupation BUSINESS OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 24 / 2010  
Transaction ID: SA11.48282  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1990.00

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

10020734350

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

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

FOR LINE NUMBER: PAGE 188 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
MRS. DEBRA S. HIGHSMITH

Mailing Address 25 CROWN VALLEY COURT

City DANVILLE State CA Zip Code 94506-1106

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

Name of Employer DORFMAN PACIFIC COMPANY Occupation VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2010  
Transaction ID: SA11.43583  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

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

Mailing Address 1210 STABLER LANE

City YUBA CITY State CA Zip Code 95993-2620

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

Name of Employer HILBERS INC. Occupation PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2010  
Transaction ID: SA11.49286  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. DOUGLAS E. HILL

Mailing Address 23 TWIN SPRINGS LANE

City SAINT LOUIS State MO Zip Code 63124-1138

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

Name of Employer EDWARD JONES Occupation SR PARTNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 02 / 2010  
Transaction ID: SA11.33493  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3000.00

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

1002073411



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

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

FOR LINE NUMBER: PAGE 189 / 582

(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. JAMES J. HILL**

Mailing Address **P.O. BOX 1588  
EL SUR RANCH**

City **MONTEREY** State **CA** Zip Code **93942-1588**

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

Name of Employer **EL SUR RANCH** Occupation **CATTLE RANCHER**

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **35200.00**

Date of Receipt  
MM / DD / YYYY  
**08 / 30 / 2010**

Transaction ID: **SA11.29660**

Amount of Each Receipt this Period  
**4800.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MR. JAMES J. HILL**

Mailing Address **P.O. BOX 1588  
EL SUR RANCH**

City **MONTEREY** State **CA** Zip Code **93942-1588**

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

Name of Employer **EL SUR RANCH** Occupation **CATTLE RANCHER**

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **35200.00**

Date of Receipt  
MM / DD / YYYY  
**09 / 23 / 2010**

Transaction ID: **SA11.45491**

Amount of Each Receipt this Period  
**30400.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MRS. SUSAN HAHN HILLGREN**

Mailing Address **923 N. MAIN STREET**

City **ORANGE** State **CA** Zip Code **92867-5402**

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

Name of Employer **SELF-EMPLOYED** Occupation **JOURNALIST**

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
MM / DD / YYYY  
**09 / 13 / 2010**

Transaction ID: **SA11.39382**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **35700.00**

TOTAL This Period (last page this line number only)

10020734332

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

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

FOR LINE NUMBER: PAGE 190 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. CARL B. HILLIARD Mailing Address 1492 CREST ROAD City DEL MAR State CA Zip Code 92014-2531 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 15 / 2010 Transaction ID: SA11.40315 Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
	Name of Employer CITY OF DEL MAR Occupation CITY COUNCILMAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	
	<b>B.</b> Full Name (Last, First, Middle Initial) MR. RODERICK HILLS Mailing Address 3125 CHAIN BRIDGE ROAD City WASHINGTON State DC Zip Code 20016-3411 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 22 / 2010 Transaction ID: SA11.45217 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
	Name of Employer HILLS, STERN & MORLEY, L.L.P. Occupation LAWYER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MR. HARVEY D. HINMAN Mailing Address 97 SELBY LANE City ATHERTON State CA Zip Code 94027-3926 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 29 / 2010 Transaction ID: SA11.50666 Amount of Each Receipt this Period 1200.00 CONTRIBUTION	
Name of Employer PILLSBURY WINTHROP SALAN PITTMAN Occupation LAWYER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00		
SUBTOTAL of Receipts This Page (optional) ..... ▶ 3200.00		
TOTAL This Period (last page this line number only) ..... ▶		

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

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

FOR LINE NUMBER: PAGE 192 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MR. FREDERICK E. HITCHCOCK, JR.</b>	Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
	Mailing Address <b>P.O. BOX 8610</b>	Transaction ID: <b>SA11.45487</b>
	City State Zip Code <b>CITY OF INDUSTRY CA 91748-0610</b>	Amount of Each Receipt this Period <b>15400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HITCHCOCK AUTOMOTIVE RESOURCES</b>	Occupation <b>AUTO DEALER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>30400.00</b>	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MS. HELEN JO HOBBS</b>	Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
	Mailing Address <b>332 23RD AVENUE</b>	Transaction ID: <b>SA11.38940</b>
	City State Zip Code <b>SAN FRANCISCO CA 94121-2011</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>RESTAURANT &amp; BAR</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. MARK HOFFMAN</b>	Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
	Mailing Address <b>909 FAIRVIEW DRIVE</b>	Transaction ID: <b>SA11.36450</b>
	City State Zip Code <b>WOODLAND CA 95695-6835</b>	Amount of Each Receipt this Period <b>1000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SACRAMENTO VALLEY FARM CREDIT</b>	Occupation <b>PRESIDENT/CEO</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<b>18800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

1002073433

**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 193 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>MR. RICHARD HOLBROOK</b>		Date of Receipt MM / DD / YYYY <b>09 / 01 / 2010</b>
Mailing Address <b>505 ST. THOMAS LANE</b>		Transaction ID: <b>SA11.30279</b>
City <b>FOSTER CITY</b>	State <b>CA</b>	Zip Code <b>94404-3977</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>300.00</b>	
Name of Employer <b>SELF</b>	Occupation <b>INVESTMENT ADVISOR</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>300.00</b>	

B. Full Name (Last, First, Middle Initial) <b>MR. DAVID L. HOROWITZ</b>		Date of Receipt MM / DD / YYYY <b>08 / 05 / 2010</b>
Mailing Address <b>27241 LA PAC RD STE B</b>		Transaction ID: <b>SA11.26312</b>
City <b>LAGUNA NIGUEL</b>	State <b>CA</b>	Zip Code <b>92677-3602</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>30400.00</b>	
Name of Employer <b>HOROWITZ GROUP</b>	Occupation <b>PRESIDENT</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>30400.00</b>	

C. Full Name (Last, First, Middle Initial) <b>MR. PRESTON B. HOTCHKIS</b>		Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
Mailing Address <b>125 E. VICTORIA STREET SUITE L</b>		Transaction ID: <b>SA11.33516</b>
City <b>SANTA BARBARA</b>	State <b>CA</b>	Zip Code <b>93101-6008</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1500.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1500.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>32200.00</b>
TOTAL This Period (last page this line number only) .....	

1002073433

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

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

FOR LINE NUMBER: PAGE 194 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. KENNETH R. HOVATTER</b>		Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
Mailing Address <b>1310 THURMAN STREET</b>		Transaction ID: <b>SA11.49271</b>
City <b>LODI</b> State <b>CA</b> Zip Code <b>95240-3145</b>	Amount of Each Receipt this Period <b>10000.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>SELF-EMPLOYED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>10000.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. TIMOTHY G. HOXIE</b>		Date of Receipt MM / DD / YYYY <b>09 / 21 / 2010</b>
Mailing Address <b>16 VIDA DESCANSADA</b>		Transaction ID: <b>SA11.44107</b>
City <b>ORINDA</b> State <b>CA</b> Zip Code <b>94563-1829</b>	Amount of Each Receipt this Period <b>500.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>	
Name of Employer <b>JONES DAY</b>	Occupation <b>ATTORNEY</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. G. RICH HUBLER</b>		Date of Receipt MM / DD / YYYY <b>09 / 01 / 2010</b>
Mailing Address <b>10592 AINSWORTH DRIVE</b>		Transaction ID: <b>SA11.30375</b>
City <b>LOS ALTOS</b> State <b>CA</b> Zip Code <b>94024-7445</b>	Amount of Each Receipt this Period <b>500.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>C.P.A.</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>11000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734537

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

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

FOR LINE NUMBER: PAGE 195 / 582  
(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)  
CARLY VICTORY COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) MRS. JACQUELINE JOSEPHINE HUBLER	Date of Receipt MM / DD / YYYY 09 / 01 / 2010
	Mailing Address 10592 AINSWORTH DRIVE	Transaction ID: SA11.30365
	City State Zip Code LOS ALTOS CA 94024-7445	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer PALO ALTO MEDICAL FOUNDATION	Occupation X-RAY TECHNICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>B.</b>	Full Name (Last, First, Middle Initial) MR. JEREMY HUGHES	Date of Receipt MM / DD / YYYY 09 / 08 / 2010
	Mailing Address 455 S. DELL NORTE AVENUE	Transaction ID: SA11.36379
	City State Zip Code KERMAN CA 93630-1291	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	
<b>C.</b>	Full Name (Last, First, Middle Initial) MR. MIKE HUGHES	Date of Receipt MM / DD / YYYY 09 / 15 / 2010
	Mailing Address 6333 CONTRA COSTA ROAD	Transaction ID: SA11.40464
	City State Zip Code OAKLAND CA 94618-2144	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer AQUABELLA ORGANICS	Occupation CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		3400.00
<b>TOTAL</b> This Period (last page this line number only) .....		

1002073433

**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 196 / 582
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. SILVIA HUGHES

Mailing Address 6333 CONTRA COSTA ROAD

City State Zip Code  
OAKLAND CA 94618-2144

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 ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2010

Transaction ID: SA11.40459

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. WILLIAM J. HUME

Mailing Address 600 MONTGOMERY STREET  
28TH FLOOR

City State Zip Code  
SAN FRANCISCO CA 94111-2803

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

Name of Employer Occupation  
BASIC AMERICAN, INC. EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2010

Transaction ID: SA11.30280

Amount of Each Receipt this Period  
30000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MS. DEBRA G. HUMPHREYS

Mailing Address P.O. BOX 4050

City State Zip Code  
JOPLIN MO 64803-4050

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 ▼  
2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2010

Transaction ID: SA11.40452

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ **32900.00**

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

100  
101  
102  
103  
104  
105  
106  
107  
108  
109  
110  
111  
112  
113  
114



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 197 / 582
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. KELLY HUNT

Mailing Address 1474 MENTON STREET

City DANVILLE State CA Zip Code 94506-2036

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

Name of Employer ENTERPRISE HOLDINGS Occupation REGIONAL VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
09 / 03 / 2010

Transaction ID: SA11.33587

Amount of Each Receipt this Period 500.00

CONTRIBUTION

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

Mailing Address 11700 HARRINGTON

City BAKERSFIELD State CA Zip Code 93311-9275

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

Name of Employer WELLS FARGO ADVISORS Occupation WEALTH MANAGEMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

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

Transaction ID: SA11.38413

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. DERK K. HUNTER

Mailing Address 15 BLUE RIDGE LANE

City WOODSIDE State CA Zip Code 94062-2501

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 MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58936

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3900.00

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

10020734360

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

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

FOR LINE NUMBER: PAGE 198 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. JAMES L. HUNTER</b>		Date of Receipt MM / DD / YYYY <b>09 / 22 / 2010</b>
Mailing Address <b>801 PACIFIC AVENUE</b>		Transaction ID: <b>SA11.45231</b>
City <b>MANHATTAN BEACH</b>	State <b>CA</b>	Zip Code <b>90266-5849</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>BARON REAL ESTATE</b>	Occupation <b>VICE CHAIRMAN</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. JERRY M. HUNTER</b>		Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
Mailing Address <b>245 UNION BLVD. APARTMENT 902</b>		Transaction ID: <b>SA11.33488</b>
City <b>SAINT LOUIS</b>	State <b>MO</b>	Zip Code <b>63108-1224</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>BRYAN CAVE L.L.P.</b>	Occupation <b>ATTORNEY</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. JOANNE B. HUNTER</b>		Date of Receipt MM / DD / YYYY <b>09 / 22 / 2010</b>
Mailing Address <b>801 PACIFIC AVENUE</b>		Transaction ID: <b>SA11.45213</b>
City <b>MANHATTAN BEACH</b>	State <b>CA</b>	Zip Code <b>90266-5849</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>BARON REAL ESTATE</b>	Occupation <b>ASSISTANT SECRETARY</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002074511

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

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

FOR LINE NUMBER: PAGE 199 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

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

Mailing Address **29425 CHAGRIN BLVD. #300**

City State Zip Code  
**PEPPER PIKE OH 44122-4637**

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

Name of Employer Occupation  
**DIVERSIFIED RESOURCES INC. PRESIDENT**

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date **20000.00**

Date of Receipt  
**09 / 27 / 2010**

Transaction ID: **SA11.49089**

Amount of Each Receipt this Period  
**20000.00**

CONTRIBUTION

**B.**

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

Mailing Address **65 LARK PLACE**

City State Zip Code  
**ALAMO CA 94507-1867**

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

Name of Employer Occupation  
**NOVOGRADACT COMPANY L.L.P. C.P.A.**

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date **2400.00**

Date of Receipt  
**09 / 29 / 2010**

Transaction ID: **SA11.50610**

Amount of Each Receipt this Period  
**2400.00**

CONTRIBUTION

**C.**

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

Mailing Address **639 28TH STREET**

City State Zip Code  
**SAN FRANCISCO CA 94131-2115**

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 **1000.00**

Date of Receipt  
**09 / 10 / 2010**

Transaction ID: **SA11.38941**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

**22900.00**

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

10020734562

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

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

FOR LINE NUMBER: PAGE 200 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MR. RAYMOND B. HUTTIG</b>	Date of Receipt MM / DD / YYYY <b>09 / 22 / 2010</b>
	Mailing Address <b>639 28TH STREET</b>	Transaction ID: <b>SA11.45257</b>
	City State Zip Code <b>SAN FRANCISCO CA 94131-2115</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MR. RUSSEL S. HYZEN</b>	Date of Receipt MM / DD / YYYY <b>09 / 15 / 2010</b>
	Mailing Address <b>6152 OCEAN VIEW DRIVE</b>	Transaction ID: <b>SA11.40320</b>
	City State Zip Code <b>OAKLAND CA 94618-1857</b>	Amount of Each Receipt this Period <b>1200.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>BLAUEX</b>	Occupation <b>BUSINESS DEVELOPER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1200.00</b>	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. DAVID B. INGRAM</b>	Date of Receipt MM / DD / YYYY <b>09 / 08 / 2010</b>
	Mailing Address <b>4417 TYNE BLVD.</b>	Transaction ID: <b>SA11.36390</b>
	City State Zip Code <b>NASHVILLE TN 37215-4537</b>	Amount of Each Receipt this Period <b>1000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>D.B.I. BEVERAGE INC.</b>	Occupation <b>CHAIRMAN</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<b>2700.00</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 201 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. GORDON INMAN</b>		Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
Mailing Address <b>11 CABALLEROS ROAD</b>		Transaction ID: <b>SA11.58959</b>
City <b>ROLLING HILLS</b>	State <b>CA</b>	Zip Code <b>90274-5279</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. NANCY INMAN</b>		Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
Mailing Address <b>11 CABALLEROS ROAD</b>		Transaction ID: <b>SA11.58960</b>
City <b>ROLLING HILLS</b>	State <b>CA</b>	Zip Code <b>90274-5279</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MS. NANCY L. IREDALE</b>		Date of Receipt MM / DD / YYYY <b>09 / 07 / 2010</b>
Mailing Address <b>515 S. FLOWER STREET FLOOR 25</b>		Transaction ID: <b>SA11.35509</b>
City <b>LOS ANGELES</b>	State <b>CA</b>	Zip Code <b>90071-2201</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>PAUL HASTINGS</b>	Occupation <b>TAX LAWYER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>7200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073439

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

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

FOR LINE NUMBER: PAGE 202 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. KEITH D. IRWIN

Mailing Address 9055 CAMINO DEL AVION

City State Zip Code  
**GRANITE BAY CA 95746-5856**

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 ▼ 2400.00

Date of Receipt **09 / 15 / 2010**  
Transaction ID: SA11.40326  
Amount of Each Receipt this Period 2400.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MRS. CANDICE L. IVERS

Mailing Address 2871 VISTA ACEDERA

City State Zip Code  
**CARLSBAD CA 92009-6900**

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 ▼ 1000.00

Date of Receipt **09 / 01 / 2010**  
Transaction ID: SA11.30360  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. DAVID H. JACKSON

Mailing Address 3468 AVENUE 408

City State Zip Code  
**KINGSBURG CA 93631-9695**

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

Name of Employer Occupation  
GRETA WESTERN CHEMICAL FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 08 / 2010**  
Transaction ID: SA11.36378  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ **3900.00**

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

1302074433

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

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

FOR LINE NUMBER: PAGE 203 / 582  
(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
LOU JACKSON

Mailing Address 40952 ROAD 32

City State Zip Code  
KINGSBURG CA 93631-9603

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

Name of Employer Occupation  
SELF-EMPLOYED FARMER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2010

Transaction ID: SA11.33581

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MR. MIKE JACKSON

Mailing Address 40952 ROAD 32

City State Zip Code  
KINGSBURG CA 93631-9603

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

Name of Employer Occupation  
MIKE JACKSON FARMS FARMER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2010

Transaction ID: SA11.33594

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MR. ALI JAHANGIRI

Mailing Address 96 DISCOVERY

City State Zip Code  
IRVINE CA 92618-3105

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

Name of Employer Occupation  
HEALTH NEWS C.E.O.

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 455.00

Date of Receipt  
MM / DD / YYYY  
09 / 28 / 2010

Transaction ID: SA11.59666

Amount of Each Receipt this Period  
455.00

CONTRIBUTION

IN-KIND: BEVERAGES

SUBTOTAL of Receipts This Page (optional) ..... ▶ 5255.00

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

10  
11  
12  
13  
14  
15  
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17  
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24

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

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

FOR LINE NUMBER: PAGE 204 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MS. SUE JAMIESSON</b>	Date of Receipt MM / DD / YYYY <b>08 / 16 / 2010</b>
	Mailing Address <b>340 LOS TULARES RD</b>	Transaction ID: <b>SA11.26316</b>
	City State Zip Code <b>CARMEL VALLEY CA 93924-9686</b>	Amount of Each Receipt this Period <b>1000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SALINAS TOYOTA</b>	Occupation <b>AUTO DEALER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MRS. TERRI JAMIESON</b>	Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
	Mailing Address <b>P.O. BOX 82515</b>	Transaction ID: <b>SA11.38689</b>
	City State Zip Code <b>BAKERSFIELD CA 93380-2515</b>	Amount of Each Receipt this Period <b>1000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. JOHN I. JELAVICH</b>	Date of Receipt MM / DD / YYYY <b>09 / 03 / 2010</b>
	Mailing Address <b>1875 TRES PICOS DRIVE</b>	Transaction ID: <b>SA11.33579</b>
	City State Zip Code <b>YUBA CITY CA 95993-6068</b>	Amount of Each Receipt this Period <b>250.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RIVER VALLEY COMMUNITY BA-NK</b>	Occupation <b>BANKER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<b>2250.00</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: (check only one)	PAGE 205 / 582
<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. PATRICK N. JENKINS**

Mailing Address **P.O. BOX 628**

City **RED BLUFF** State **CA** Zip Code **96080-0628**

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

Name of Employer **WESTOWER COMPANY** Occupation **ORCHARDIST**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date **250.00**

Date of Receipt **09 / 16 / 2010**

Transaction ID: **SA11.42710**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. JAMES D. JOHANSSON**

Mailing Address **17 SUNLIGHT COURT**

City **OROVILLE** State **CA** Zip Code **95966-6344**

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

Name of Employer **LODESTAR FARMS** Occupation **FARMER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date **250.00**

Date of Receipt **09 / 16 / 2010**

Transaction ID: **SA11.42693**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

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

Mailing Address **P.O. BOX 621**

City **YUBA CITY** State **CA** Zip Code **95992-0621**

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

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date **500.00**

Date of Receipt **09 / 27 / 2010**

Transaction ID: **SA11.49273**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **1000.00**

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

100207143

**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 206 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MS. ELIZABETH JOHNSON**

Mailing Address **5591 COUNTRY CLUB DRIVE**

City **OAKLAND** State **CA** Zip Code **94618-1713**

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

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 22 / 2010**

Transaction ID: **SA11.45220**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. FRANKLIN P. JOHNSON, JR.**

Mailing Address **1411 EDGEWOOD DRIVE**

City **PALO ALTO** State **CA** Zip Code **94301-3118**

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

Name of Employer **SELF-EMPLOYED** Occupation **VENTURE CAPITALIST**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **15000.00**

Date of Receipt **08 / 19 / 2010**

Transaction ID: **SA11.27668**

Amount of Each Receipt this Period **15000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. KENT D. JOHNSON**

Mailing Address **566 WELLSFORD ROAD**

City **MODESTO** State **CA** Zip Code **95357-0311**

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

Name of Employer **A.G. PRODUCTION COMPANY** Occupation **C.E.O.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 13 / 2010**

Transaction ID: **SA11.39349**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **16000.00**

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

100207194411

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

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

FOR LINE NUMBER: PAGE 207 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS. MARGARET JOHNSON**

Mailing Address **P.O. BOX 667  
5111 EL SECRETO**

City **RANCHO SANTA FE** State **CA** Zip Code **92067-0667**

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

Name of Employer **QUALCOMM** Occupation **EXECUTIVE**

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **1000.00**

Date of Receipt **09 / 15 / 2010**

Transaction ID: **SA11.40316**

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MRS. S. SUE JOHNSON**

Mailing Address **2551 RAEBURN**

City **RIVERSIDE** State **CA** Zip Code **92506-5142**

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 **2400.00**

Date of Receipt **09 / 30 / 2010**

Transaction ID: **SA11.58908**

Amount of Each Receipt this Period **2400.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MR. THEODORE R. JOHNSON, JR.**

Mailing Address **7829 CENTER BLVD. SE #297**

City **SNOQUALMIE** State **WA** Zip Code **98065-9096**

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 **09 / 24 / 2010**

Transaction ID: **SA11.48333**

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **4400.00**

TOTAL This Period (last page this line number only)

10020734570

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

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

FOR LINE NUMBER: PAGE 208 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. WILLIS J. JOHNSON Mailing Address 4286 SUISUN VALLEY ROAD City FAIRFIELD State CA Zip Code 94534-3159 FEC ID number of contributing federal political committee. C Name of Employer COPART Occupation CHAIRMAN OF THE BOARD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 30400.00		Date of Receipt 09 / 24 / 2010 Transaction ID: SA11.48319 Amount of Each Receipt this Period 30400.00 CONTRIBUTION
<b>B.</b> Full Name (Last, First, Middle Initial) MR. WILLIAM R. JOHNSON, JR. Mailing Address P.O. BOX 1052 City RIVERSIDE State CA Zip Code 92502-1052 FEC ID number of contributing federal political committee. C Name of Employer JOHNSON MACHINERY CO Occupation PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 32800.00		Date of Receipt 07 / 30 / 2010 Transaction ID: SA11.26329 Amount of Each Receipt this Period 30400.00 CONTRIBUTION
<b>C.</b> Full Name (Last, First, Middle Initial) MR. WILLIAM R. JOHNSON, JR. Mailing Address P.O. BOX 1052 City RIVERSIDE State CA Zip Code 92502-1052 FEC ID number of contributing federal political committee. C Name of Employer JOHNSON MACHINERY CO Occupation PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 32800.00		Date of Receipt 09 / 30 / 2010 Transaction ID: SA11.58909 Amount of Each Receipt this Period 2400.00 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional) .....		63200.00
TOTAL This Period (last page this line number only) .....		

10020734571

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

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

FOR LINE NUMBER: PAGE 209 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. PAUL D. JONE Mailing Address 2659 FILBERT STREET City State Zip Code SAN FRANCISCO CA 94123-3215 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 29 / 2010 Transaction ID: SA11.50851 Amount of Each Receipt this Period 250.00 CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) MR. CLIFTON JONES Mailing Address 10945 SOUTH STREET #305 City State Zip Code CERRITOS CA 90703-5350 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2010 Transaction ID: SA11.49284 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
Name of Employer THE JONES COMPANY Occupation ARCHITECT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) FLETCHER JONES, JR. Mailing Address 7300 W. SAHARA AVE City State Zip Code LAS VEGAS NV 89117-2756 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 08 / 16 / 2010 Transaction ID: SA11.26318 Amount of Each Receipt this Period 15000.00 CONTRIBUTION
Name of Employer FLETCHER JONES MGMT GROUP Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 15000.00		

SUBTOTAL of Receipts This Page (optional) .....	▶	16250.00
TOTAL This Period (last page this line number only) .....	▶	

10020744172

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 210 / 582
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) MRS. JANET JONES	Date of Receipt MM / DD / YYYY 09 / 08 / 2010
	Mailing Address 6440 N. SEQUOIA DRIVE	Transaction ID: SA11.36377
	City FRESNO State CA Zip Code 93711-1231	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MRS. MAURINE JONES	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 2254 W. DOVEWOOD LANE	Transaction ID: SA11.38726
	City FRESNO State CA Zip Code 93711-2810	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) HON. WILLIAM L. JONES	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 2254 W. DOVEWOOD LANE	Transaction ID: SA11.38743
	City FRESNO State CA Zip Code 93711-2810	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer PACIFIC ETHANOL INC. Occupation CHAIRMAN OF THE BOARD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

110320734373

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

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

FOR LINE NUMBER: PAGE 211 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. LINDSAY M. JOOST

Mailing Address 2970 BROADWAY

City State Zip Code  
SAN FRANCISCO CA 94115-1062

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 ▼  
7500.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

Transaction ID: SA11.38990

Amount of Each Receipt this Period  
7500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. PETER M. JOOST

Mailing Address 2970 BROADWAY

City State Zip Code  
SAN FRANCISCO CA 94115-1062

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

Name of Employer  
SELF-EMPLOYED Occupation  
INVESTMENTS

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7500.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

Transaction ID: SA11.38989

Amount of Each Receipt this Period  
7500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. ANTHONY A. JOSEPHSON

Mailing Address 5302 FOXHOUND WAY

City State Zip Code  
SAN DIEGO CA 92130-6939

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

Name of Employer  
CARMEL CAPITAL PARTNERS Occupation  
FINANCE

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50780

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **17400.00**

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

10020734374

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

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

FOR LINE NUMBER: PAGE 212 / 582  
(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

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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MRS. JENNIFER JOSEPHSON

Mailing Address 2516 RUETTE NICOLE

City LA JOLLA State CA Zip Code 92037-2008

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 ▼ 2400.00

Date of Receipt 09 / 29 / 2010

Transaction ID: SA11.50846

Amount of Each Receipt this Period 2400.00

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
MR. BRIAN JUHNKE

Mailing Address 315 N. MAGNOLIA AVENUE

City EL CAJON State CA Zip Code 92020-3907

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

Name of Employer **MOTOR WORLD OF EL CAJON** Occupation **OWNER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2010

Transaction ID: SA11.44128

Amount of Each Receipt this Period 500.00

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
MITCH ALAN JUNKINS

Mailing Address 1409 HIGH BLUFF DRIVE

City NEWPORT BEACH State CA Zip Code 92660-8202

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

Name of Employer **CDM COMPANY** Occupation **PRESIDENT & CEO**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 16 / 2010

Transaction ID: SA11.26315

Amount of Each Receipt this Period 500.00

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3400.00

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

10020734373



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

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

FOR LINE NUMBER: PAGE 213 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. KENNETH I. JUSTER**

Mailing Address **188 MINNA STREET**

City **SAN FRANCISCO** State **CA** Zip Code **94105-4051**

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

Name of Employer **SALESFORCE.COM** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **09 / 20 / 2010**

Transaction ID: **SA11.43556**

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MR. CARSON KALIN**

Mailing Address **135 APRICOT LANE**

City **LOS GATOS** State **CA** Zip Code **95030-5205**

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

Name of Employer **PROINSURANCE SERVICES** Occupation **SALES**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 17 / 2010**

Transaction ID: **SA11.43493**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**MR. ANDREW KAPLA**

Mailing Address **4350 LA JOLLA VILLAGE DRIVE**

City **SAN DIEGO** State **CA** Zip Code **92122-1243**

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

Name of Employer **PACVENTURES** Occupation **PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **09 / 30 / 2010**

Transaction ID: **SA11.58752**

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5800.00**

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

10020734376

**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 214 / 582
<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. LEE R. KAPLAN**

Mailing Address **10270 KINSELLA LANE**

City **SAINT LOUIS** State **MO** Zip Code **63124-1023**

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

Name of Employer **ENTERPRISE HOLDINGS, INC.** Occupation **SENIOR VICE PRESIDENT/CHIEF ADMINISTRATION**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 02 / 2010**  
Transaction ID: **SA11.33487**  
Amount of Each Receipt this Period **1000.00**  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. BRUCE A. KARSH**

Mailing Address **333 S GRAND AVE  
28TH FLOOR**

City **LOS ANGELES** State **CA** Zip Code **90071-1504**

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

Name of Employer **OAKTREE CAPITAL MGT** Occupation **INVESTMENTS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **32800.00**

Date of Receipt **09 / 30 / 2010**  
Transaction ID: **SA11.58958**  
Amount of Each Receipt this Period **32800.00**  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOE E. KASINER, JR.**

Mailing Address **1565 W. LEWISTON AVENUE**

City **RIVERDALE** State **CA** Zip Code **93656-9303**

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

Name of Employer **FOUR CORNERS CUSTOM FARMING, INC.** Occupation **FARMER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **08 / 31 / 2010**  
Transaction ID: **SA11.29766**  
Amount of Each Receipt this Period **500.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **34300.00**

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

10020734377

**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 215 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) MRS. JUSTINE KASINER	Date of Receipt MM / DD / YYYY 08 / 31 / 2010
	Mailing Address 1565 W. LEWISTON AVENUE	Transaction ID: SA11.29749
	City State Zip Code RIVERDALE CA 93656-9303	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Retired	Aggregate Year-to-Date 500.00

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. F. VAN KASPER	Date of Receipt MM / DD / YYYY 09 / 16 / 2010
	Mailing Address 1200 CALIFORNIA STREET #23A	Transaction ID: SA11.42737
	City State Zip Code SAN FRANCISCO CA 94109-0004	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED Retired	Aggregate Year-to-Date 1000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) MRS. BARBARA L. KELLER	Date of Receipt MM / DD / YYYY 09 / 15 / 2010
	Mailing Address 307 NARCISSUS AVENUE	Transaction ID: SA11.40343
	City State Zip Code CORONA DEL MAR CA 92625-3006	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Retired	Aggregate Year-to-Date 2400.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734578

**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 216 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MS. PHYLLIS GORBY KELLEY</b>	Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>
Mailing Address <b>3562 CROWNRIDGE DRIVE</b>	Transaction ID: <b>SA11.27675</b>
City <b>SHERMAN OAKS</b> State <b>CA</b> Zip Code <b>91403-4814</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. GREGORY G. KELLY</b>	Date of Receipt MM / DD / YYYY <b>09 / 01 / 2010</b>
Mailing Address <b>3610 AMERICAN RIVER DRIVE #190</b>	Transaction ID: <b>SA11.30352</b>
City <b>SACRAMENTO</b> State <b>CA</b> Zip Code <b>95864-5999</b>	Amount of Each Receipt this Period <b>31300.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>K.K.N., INC.</b> Occupation <b>PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>31300.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MS. DONA S. KENDALL</b>	Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>
Mailing Address <b>10466 REVUELTA WAY</b>	Transaction ID: <b>SA11.27680</b>
City <b>LOS ANGELES</b> State <b>CA</b> Zip Code <b>90077-3805</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>32550.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734373

**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 217 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MAJ. DENNIS M. KENNEALLY**

Mailing Address **6470 BRYNWOOD WAY**

City **SAN DIEGO** State **CA** Zip Code **92120-3806**

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 ▼ **500.00**

Date of Receipt **09 / 15 / 2010**

Transaction ID: **SA11.40337**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. PARKER S. KENNEDY**

Mailing Address **655 N. RANCH WOOD TRAIL**

City **ORANGE** State **CA** Zip Code **92869-2302**

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

Name of Employer **THE FIRST AMERICAN CORP.** Occupation **CEO**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **08 / 11 / 2010**

Transaction ID: **SA11.26279**

Amount of Each Receipt this Period **5000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MS. JANET KERR-GUMER**

Mailing Address **1040 4TH STREET**

City **SANTA MONICA** State **CA** Zip Code **90403-3872**

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

Name of Employer **PEPPERDINE UNIVERSITY** Occupation **EXECUTIVE DIRECTOR**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt **08 / 27 / 2010**

Transaction ID: **SA11.29533**

Amount of Each Receipt this Period **1500.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **7000.00**

**TOTAL** This Period (last page this line number only) ..... **7000.00**

10020771

**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 218 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. HOWARD A. KEYES

Mailing Address 5855 VAN NUYS BLVD.

City VAN NUYS State CA Zip Code 91401-4219

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

Name of Employer KEYES AUTOMOTIVE GROUP Occupation AUTO DEALER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 35200.00

Date of Receipt 08 / 19 / 2010

Transaction ID: SA11.27588

Amount of Each Receipt this Period 4800.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. HOWARD A. KEYES

Mailing Address 5855 VAN NUYS BLVD.

City VAN NUYS State CA Zip Code 91401-4219

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

Name of Employer KEYES AUTOMOTIVE GROUP Occupation AUTO DEALER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 35200.00

Date of Receipt 08 / 24 / 2010

Transaction ID: SA11.28186

Amount of Each Receipt this Period 30400.00

CONTRIBUTION

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

Mailing Address P.O. BOX 7066

City CARMEL State CA Zip Code 93921-7066

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 ▼ 500.00

Date of Receipt 09 / 02 / 2010

Transaction ID: SA11.33524

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 35700.00

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

1002071431

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 219 / 582 (check only one)
<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MS. NORMA JEAN HODGES KEYSTON</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
	Mailing Address <b>P.O. BOX 223011</b>	Transaction ID: <b>SA11.33523</b>
	City <b>CARMEL</b> State <b>CA</b> Zip Code <b>93922-3011</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MR. LUTHER J. KHACHIGIAN</b>	Date of Receipt MM / DD / YYYY <b>09 / 03 / 2010</b>
	Mailing Address <b>2610 RICHARD AVENUE</b>	Transaction ID: <b>SA11.33578</b>
	City <b>CAYUCOS</b> State <b>CA</b> Zip Code <b>93430-1469</b>	Amount of Each Receipt this Period <b>1000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>CAL-WESTER FARMING COMPANY</b> Occupation <b>C.E.O./SECRETARY/TREASURER</b>	Aggregate Year-to-Date <b>1000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. JOHN B. KILROY, SR.</b>	Date of Receipt MM / DD / YYYY <b>09 / 22 / 2010</b>
	Mailing Address <b>12200 W. OLYMPIC BLVD SUITE 200</b>	Transaction ID: <b>SA11.45253</b>
	City <b>LOS ANGELES</b> State <b>CA</b> Zip Code <b>90064-1044</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>KILROY REALTY CORP</b> Occupation <b>EXECUTIVE</b>	Aggregate Year-to-Date <b>2400.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073432

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

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

FOR LINE NUMBER: PAGE 220 / 582  
(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
NELLY LLANOS KILROY

Mailing Address 12200 W. OLYMPIC BLVD. #200

City State Zip Code  
LOS ANGELES CA 90064-1044

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 ▼  
2400.00

Date of Receipt

MM / DD / YYYY  
09 / 22 / 2010

Transaction ID: SA11.45273

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MRS. ELIZABETH S. KIMBALL

Mailing Address 150 WYNDOVER AVENUE

City State Zip Code  
CLOVIS CA 93611-3541

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 ▼  
2400.00

Date of Receipt

MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36367

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MRS. GRETCHEN BUSH KIMBALL

Mailing Address 12 EVCALYPTUS ROAD

City State Zip Code  
BELVEDERE CA 94920-2436

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
N/A COMMUNITY VOLUNTEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7500.00

Date of Receipt

MM / DD / YYYY  
08 / 27 / 2010

Transaction ID: SA11.29529

Amount of Each Receipt this Period  
7500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

12300.00

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

11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21



**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 221 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. WILLIAM L. KIMSEY

Mailing Address 550 FREEHAVEN DRIVE

City State Zip Code  
**SANTA BARBARA CA 93108-1615**

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

Name of Employer  
KIMSEY CONSULTING      Occupation  
OWNER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2010

Transaction ID: SA11.28208

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. DALE A. KIRBY

Mailing Address 337 W. WOODHAVEN DRIVE

City State Zip Code  
**COLUSA CA 95932-3282**

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

Name of Employer  
COLUSA REGIONAL MEDICAL CENTER      Occupation  
CEO

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: SA11.38411

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. DAVID M. KIRCHHEIMER

Mailing Address 700 FLINTRIDGE AVENUE

City State Zip Code  
**LA CANADA CA 91011-4027**

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

Name of Employer  
OAKTREE CAPITAL MANAGEMENT LLP      Occupation  
CFO/CAO

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4800.00

Date of Receipt  
MM / DD / YYYY  
09 / 13 / 2010

Transaction ID: SA11.39375

Amount of Each Receipt this Period  
4800.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **6300.00**

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

1002073434

**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 222 / 582
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MRS. VIRGINIA KIRSCHENMAN</b>	Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>P.O. BOX 27</b>	Transaction ID: <b>SA11.29728</b>
City <b>EDISON</b> State <b>CA</b> Zip Code <b>93220-0027</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. WAYNE KIRSCHENMAN</b>	Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>P.O. BOX 27</b>	Transaction ID: <b>SA11.29760</b>
City <b>EDISON</b> State <b>CA</b> Zip Code <b>93220-0027</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>FARMER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>WILLIAM KISTLER</b>	Date of Receipt MM / DD / YYYY <b>08 / 16 / 2010</b>
Mailing Address <b>2138 BIRNAM WOOD DRIVE</b>	Transaction ID: <b>SA11.26291</b>
City <b>SANTA BARBARA</b> State <b>CA</b> Zip Code <b>93108-2208</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020743

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

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

FOR LINE NUMBER: PAGE 223 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>TWILLA J. KLASSEN</b>	Date of Receipt MM / DD / YYYY <b>08 / 26 / 2010</b>
	Mailing Address <b>2600 BARRINGTON STREET #5</b>	Transaction ID: <b>SA11.29472</b>
	City State Zip Code <b>BAKERSFIELD CA 93309-8003</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	
Full Name (Last, First, Middle Initial) <b>MRS. CHERYL KLINE</b>		
Mailing Address <b>308 W. VAN BUREN</b>		
<b>B.</b>	City State Zip Code <b>FARINA IL 62838-1225</b>	Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
	FEC ID number of contributing federal political committee. <b>C</b>	Transaction ID: <b>SA11.49110</b>
	Name of Employer <b>HAWKEY &amp; KLINE DRILLING</b>	Occupation <b>OWNER</b>
	Amount of Each Receipt this Period <b>250.00</b>	Aggregate Year-to-Date ▼ <b>250.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>CONTRIBUTION</b>
Full Name (Last, First, Middle Initial) <b>MR. JAMES D. KLINGBEIL</b>		
Mailing Address <b>615 FRONT STREET</b>		
City State Zip Code <b>SAN FRANCISCO CA 94111-1913</b>		
<b>C.</b>	FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
	Name of Employer <b>KLINGBEIL CAPITAL MANAGEM-ENT</b>	Occupation <b>REAL ESTATE DEVELOPMENT</b>
	Amount of Each Receipt this Period <b>2500.00</b>	Aggregate Year-to-Date ▼ <b>2500.00</b>
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶ <b>3250.00</b>		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

1002073433

**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 224 / 582
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. SALLY A. KLINGBEIL

Mailing Address 615 FRONT STREET

City State Zip Code  
SAN FRANCISCO CA 94111-1913

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 ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

Transaction ID: SA11.38976

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

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

Mailing Address 2670 OAK KNOLL

City State Zip Code  
SAN MARINO CA 91108-2433

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

Name of Employer  
MUNGER, TOLLES & OLSON

Occupation  
ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 22 / 2010

Transaction ID: SA11.45211

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

Mailing Address 2177 MANDEVILLE CANYON ROAD

City State Zip Code  
LOS ANGELES CA 90049-1824

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

Name of Employer  
VOYAGE MANAGEMENT

Occupation  
INVESTMENT MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
09 / 13 / 2010

Transaction ID: SA11.39372

Amount of Each Receipt this Period  
1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 5000.00

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

10020734387

**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 225 / 582
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. WALTER P. KNOEPFEL

Mailing Address 1723 SANCHEZ STREET

City State Zip Code  
SAN FRANCISCO CA 94131-2740

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 ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2010

Transaction ID: SA11.30172

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. ROBERT S. KNUDSEN

Mailing Address 21362 VISTA ESTATE

City State Zip Code  
LAKE FOREST CA 92630-7514

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

Name of Employer Occupation  
NATHAN ASSOCIATES CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4800.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2010

Transaction ID: SA11.40445

Amount of Each Receipt this Period  
4800.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. ROBERT E. KNUTS-CAYA

Mailing Address 8865 CHESTNUT ROAN WAY

City State Zip Code  
ALPINE CA 91901-2785

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

Name of Employer Occupation  
STANDARD DRYWALL INC. PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4800.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50603

Amount of Each Receipt this Period  
4800.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 9850.00

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

100207343

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

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

FOR LINE NUMBER: PAGE 226 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MR. CHASE KOCH

Mailing Address P.O. BOX 2256

City State Zip Code  
**WICHITA KS 67201-2256**

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

Name of Employer Occupation  
KOCH INDUSTRIES EXECUTIVE VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 13 / 2010

Transaction ID: SA11.39390

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. RICHARD F. KOCH

Mailing Address 1350 BAYSHORE HIGHWAY #600

City State Zip Code  
**BURLINGAME CA 94010-1887**

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

Name of Employer Occupation  
BBK CAPITAL CORPORATION REAL ESTATE DEVELOPER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 02 / 2010

Transaction ID: SA11.33465

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MS. KAY ELLEN KOCHENDERFER

Mailing Address 363 PATRICIAN WAY

City State Zip Code  
**PASADENA CA 91105-1027**

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

Name of Employer Occupation  
GIBSON, DUNN & CRUTCHER L.L.P. ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2010

Transaction ID: SA11.28212

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5800.00**

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

20  
19  
18  
17  
16  
15  
14  
13  
12  
11  
10  
9  
8  
7  
6  
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4  
3  
2  
1

**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 227 / 582
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MS. DEBORAH K. KOCKOS

Mailing Address 440 DAVIS COURT

City SAN FRANCISCO State CA Zip Code 94111-2497

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 ▼ 250.00

Date of Receipt 08 / 26 / 2010

Transaction ID: SA11.29476

Amount of Each Receipt this Period 250.00

CONTRIBUTION

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

Mailing Address 586 5TH AVENUE

City SAN FRANCISCO State CA Zip Code 94118-3929

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

Name of Employer COLDWELL BANKER Occupation REALTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2010

Transaction ID: SA11.27686

Amount of Each Receipt this Period 500.00

CONTRIBUTION

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

Mailing Address 2150 MAIN STREET #5

City RED BLUFF State CA Zip Code 96080-2372

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

Name of Employer THE CALIFORNIA GUEST SERVICES Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 24 / 2010

Transaction ID: SA11.48275

Amount of Each Receipt this Period 2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3250.00

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

10020734330

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

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

FOR LINE NUMBER: PAGE 228 / 582

(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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. PHILIP KOEN**

Mailing Address **560 S. WINCHESTER BLVD.  
SUITE 500**

City State Zip Code  
**SAN JOSE CA 95128-2500**

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

Name of Employer Occupation  
**MONTERO PARTNERS MANAGING PARTNER**

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
**09 / 07 / 2010**

Transaction ID: SA11.35513

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MR. PETER S. KOHUT, JR.**

Mailing Address **67544 POGUE ROAD**

City State Zip Code  
**ST. CLAIRSVILLE OH 43950-8415**

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

Name of Employer Occupation  
**LARROL SUPPLY INC. BUSINESS OWNER**

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
**09 / 29 / 2010**

Transaction ID: SA11.50653

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MR. NEIL M. KOK**

Mailing Address **1225 GNEISS DRIVE**

City State Zip Code  
**MCDONALD PA 15057-3552**

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

Name of Employer Occupation  
**MURRAY ENERGY LAND PROJECTS DIRECTOR**

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
**09 / 27 / 2010**

Transaction ID: SA11.49096

Amount of Each Receipt this Period  
**350.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

**2350.00**

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

11  
10  
09  
08  
07  
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01



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

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

FOR LINE NUMBER: PAGE 229 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. JOHN R. KOPEC		Date of Receipt MM / DD / YYYY 09 / 29 / 2010		
	Mailing Address 11020 W. 7TH STREET		Transaction ID: SA11.50655		
	City WEST FRANKFORT	State IL	Zip Code 62896-4192	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer K. & E. MECHANICAL		Occupation BUSINESS OWNER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			
<b>B.</b>	Full Name (Last, First, Middle Initial) MR. THEODORE P. KOROS		Date of Receipt MM / DD / YYYY 08 / 26 / 2010		
	Mailing Address 2885 HILLSIDE DRIVE		Transaction ID: SA11.29477		
	City BURLINGAME	State CA	Zip Code 94010-5957	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer RETIRED		Occupation 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) MR. LARRY J. KOSMONT		Date of Receipt MM / DD / YYYY 09 / 13 / 2010		
	Mailing Address 865 S. FIGUEROA STREET SUITE 3500		Transaction ID: SA11.39351		
	City LOS ANGELES	State CA	Zip Code 90017-5512	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer KOSMONT COMPANIES		Occupation PRESIDENT & C.E.O.			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			
SUBTOTAL of Receipts This Page (optional) .....			2250.00		
TOTAL This Period (last page this line number only) .....					

1002073432

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

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

FOR LINE NUMBER: PAGE 230 / 582  
(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

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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MRS. ANITA KRATKA		Date of Receipt MM / DD / YYYY 09 / 15 / 2010	
Mailing Address 6017 BUENA VISTA AVENUE		Transaction ID: SA11.40460	
City OAKLAND	State CA	Zip Code 94618-2126	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer M. SQUARED CONSULTING	Occupation VICE PRESIDENT BUSINESS DEVELOPMENT	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) MS. CHERI KRATKA		Date of Receipt MM / DD / YYYY 09 / 23 / 2010	
Mailing Address 2311 W. DRY CREEK ROAD		Transaction ID: SA11.47338	
City HEALDSBURG	State CA	Zip Code 95448-8131	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer PROUD TO SERVE WINERY	Occupation OWNER	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) MS. CAROLE SUMNER KRECHMAN		Date of Receipt MM / DD / YYYY 09 / 30 / 2010	
Mailing Address 30 COLGATE DRIVE		Transaction ID: SA11.58930	
City RANCHO MIRAGE	State CA	Zip Code 92270-3723	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) .....	1500.00
TOTAL This Period (last page this line number only) .....	

1002073433

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

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

FOR LINE NUMBER: PAGE 231 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. CAROL KROEKER

Mailing Address 18424 SCARONI AVENUE

City SHAFTER State CA Zip Code 93263-9769

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 ▼ 1250.00

Date of Receipt: 08 / 24 / 2010  
Transaction ID: SA11.28207  
Amount of Each Receipt this Period: 1250.00  
CONTRIBUTION

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

Mailing Address 780 MULBERRY LANE

City DAVIS State CA Zip Code 95616-3429

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

Name of Employer: STROMER REALTY Occupation: REALTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 16 / 2010  
Transaction ID: SA11.42697  
Amount of Each Receipt this Period: 500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MRS. JANIS G. KUMMER

Mailing Address 225 S. ANITA AVENUE

City LOS ANGELES State CA Zip Code 90049-3837

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

Name of Employer: SELF-EMPLOYED Occupation: REAL ESTATE MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 08 / 19 / 2010  
Transaction ID: SA11.27673  
Amount of Each Receipt this Period: 1000.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2750.00

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

10020734394

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

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

FOR LINE NUMBER: PAGE 232 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. JANIS G. KUMMER

Mailing Address 225 S. ANITA AVENUE

City State Zip Code  
**LOS ANGELES CA 90049-3837**

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

Name of Employer  
SELF-EMPLOYED

Occupation  
**REAL ESTATE MANAGER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2500.00**

Date of Receipt  
MM / DD / YYYY  
**08 / 19 / 2010**

Transaction ID: SA11.27674

Amount of Each Receipt this Period  
**1500.00**

CONTRIBUTION

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

Mailing Address 7915 CAMINITO DEL CIO

City State Zip Code  
**LA JOLLA CA 92037-3404**

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

Name of Employer  
EXCELL RESEARCH

Occupation  
**PHYSICIAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
MM / DD / YYYY  
**09 / 08 / 2010**

Transaction ID: SA11.36433

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MS. MARSHA L. KUNZ

Mailing Address 1210 FLORIBUNDA

City State Zip Code  
**BURLINGAME CA 94010-7501**

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

Name of Employer  
SELF-EMPLOYED

Occupation  
**HEALTH CARE PROVIDER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
MM / DD / YYYY  
**09 / 21 / 2010**

Transaction ID: SA11.44102

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3000.00**

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

10020744

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

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

FOR LINE NUMBER: PAGE 233 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MS. ANNE L. KURZET Mailing Address 8 CHESHIRE COURT		Date of Receipt MM / DD / YYYY 09 / 27 / 2010 Transaction ID: SA11.49285 Amount of Each Receipt this Period 1000.00 <b>CONTRIBUTION</b>
City State Zip Code NEWPORT BEACH CA 92660-4210 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 ▼ 1000.00	
<b>B.</b> Full Name (Last, First, Middle Initial) MR. GARY D. LABEL Mailing Address 1150 N. MAGNOLIA AVENUE		Date of Receipt MM / DD / YYYY 09 / 23 / 2010 Transaction ID: SA11.47386 Amount of Each Receipt this Period 250.00 <b>CONTRIBUTION</b>
City State Zip Code ANAHEIM CA 92801-2605 FEC ID number of contributing federal political committee. C	Name of Employer Occupation LABEL FINANCIAL EXECUTIVE 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) MRS. NOREEN JENNEY LAFFEY Mailing Address 146 FRONTENAC FOREST		Date of Receipt MM / DD / YYYY 09 / 02 / 2010 Transaction ID: SA11.33498 Amount of Each Receipt this Period 1000.00 <b>CONTRIBUTION</b>
City State Zip Code SAINT LOUIS MO 63131-3223 FEC ID number of contributing federal political committee. C	Name of Employer Occupation COMMUNITY VOLUNTEER COMMUNITY VOLUNTEER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional) ..... ▶		2250.00
TOTAL This Period (last page this line number only) ..... ▶		

10020734585

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

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

FOR LINE NUMBER: PAGE 234 / 582

(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MS. CLARIBEL R. LAGOMARSINO**

Mailing Address **222 N. GARDEN STREET  
SUITE 400**

City **VISALIA** State **CA** Zip Code **93291-6328**

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

Name of Employer  
INFORMATION REQUESTED PER  
**BEST EFFORTS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Occupation  
INFORMATION REQUESTED PER **BEST EFFORTS**

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**09 / 03 / 2010**

Transaction ID: **SA11.33577**

Amount of Each Receipt this Period

**250.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MR. KENNETH M. LAGRANDE**

Mailing Address **1432 45TH STREET**

City **SACRAMENTO** State **CA** Zip Code **95819-4138**

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

Name of Employer  
**KEN LAGRANDE FARMS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Occupation  
**FARMER**

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt

**09 / 16 / 2010**

Transaction ID: **SA11.42711**

Amount of Each Receipt this Period

**1000.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MS. DIANE S. LAKE**

Mailing Address **1200 TAM O'SHANTER DR**

City **BAKERSFIELD** State **CA** Zip Code **93309-2455**

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

Name of Employer  
**HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Occupation  
**HOMEMAKER**

Aggregate Year-to-Date ▼  
**35200.00**

Date of Receipt

**07 / 30 / 2010**

Transaction ID: **SA11.26327**

Amount of Each Receipt this Period

**35200.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

**36450.00**

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

10020734397

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

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

FOR LINE NUMBER: PAGE 235 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MS. HEATHER K. LAMBERT**

Mailing Address **1900 DANBROOK DRIVE #313**

City **SACRAMENTO** State **CA** Zip Code **95835-1680**

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

Name of Employer **CARLY FOR CALIFORNIA** Occupation **POLITICAL CONSULTANT**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 08 / 2010**  
 Transaction ID: SA11.36397  
 Amount of Each Receipt this Period **1000.00**  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD F. LANDE**

Mailing Address **4413 BRIGGS AVENUE**

City **MONTROSE** State **CA** Zip Code **91020-1109**

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

Name of Employer **LANDE'S HVAC INC.** Occupation **CONTRACTOR**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **08 / 24 / 2010**  
 Transaction ID: SA11.28211  
 Amount of Each Receipt this Period **350.00**  
**CONTRIBUTION**

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

Mailing Address **109 ALTURAS DRIVE**

City **BURLINGAME** State **CA** Zip Code **94010-5904**

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

Name of Employer **CASHIN CO REALTORS** Occupation **REAL ESTATE**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **08 / 19 / 2010**  
 Transaction ID: SA11.27685  
 Amount of Each Receipt this Period **250.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1600.00**

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

83  
80  
85  
81  
87  
82  
84  
86  
88  
89  
90  
91  
92  
93  
94  
95  
96  
97  
98  
99  
100

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

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

FOR LINE NUMBER: PAGE 236 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. THOMAS E. LARKIN, JR.

Mailing Address **736 VIA LIDO**

City **NEWPORT BEACH** State **CA** Zip Code **92113**

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

Name of Employer **TCW GROUP INC.** Occupation **INVESTMENTS**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**30400.00**

Date of Receipt  
MM / DD / YYYY  
**08 / 16 / 2010**

Transaction ID: **SA11.26317**

Amount of Each Receipt this Period  
**30400.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. JOHN W. LARSON

Mailing Address **BOX 349**

City **ROSS** State **CA** Zip Code **94957-0349**

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 ▼  
**15000.00**

Date of Receipt  
MM / DD / YYYY  
**09 / 03 / 2010**

Transaction ID: **SA11.33591**

Amount of Each Receipt this Period  
**15000.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. PAUL R. LARSON

Mailing Address **1192 RIDGE PARK DRIVE**

City **CONCORD** State **CA** Zip Code **94518-1437**

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 ▼  
**500.00**

Date of Receipt  
MM / DD / YYYY  
**09 / 24 / 2010**

Transaction ID: **SA11.48346**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **45900.00**

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

1002074300





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

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

FOR LINE NUMBER: PAGE 238 / 582  
(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)  
CARLY VICTORY COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
MR. WILLIAM M. LAU

Mailing Address 1024 LELAND DRIVE

City LAFAYETTE State CA Zip Code 94549-4130

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 ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 22 / 2010

Transaction ID: SA11.45262

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. GARY B. LAUGHLIN

Mailing Address P.O. BOX 769

City PEBBLE BEACH State CA Zip Code 93953-0769

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

Name of Employer SELF-EMPLOYED Occupation OIL PRODUCER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50852

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. PAT LAUGHLIN

Mailing Address 591 COLUSA AVENUE

City YUBA CITY State CA Zip Code 95991-4025

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

Name of Employer STROMER REALTY Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

Transaction ID: SA11.42681

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1250.00

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

10020734601

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

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

FOR LINE NUMBER: PAGE 239 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MR. DANIEL LAURY

Mailing Address 395 OYSTER POINT BLVD.

City State Zip Code  
SOUTH SAN FRANCISCO CA 94080-1928

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
L.S.F. NETWORK, INC. C.E.O.

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

Transaction ID: SA11.47339

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MR. GUY LAVERTY

Mailing Address 48-554 VISTA PALOMINO

City State Zip Code  
LA QUINTA CA 92253-8416

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 ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58722

Amount of Each Receipt this Period  
1500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MR. JONATHAN F. LAVY

Mailing Address 428 LYNDSLEY LANE

City State Zip Code  
YUBA CITY CA 95993-7800

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
POINT FOUR INC. BUSINESS OWNER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

Transaction ID: SA11.42712

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 2500.00

TOTAL This Period (last page this line number only)

13020734602

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

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

FOR LINE NUMBER: PAGE 240 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
AMB. HOWARD H. LEACH

Mailing Address 101 CALIFORNIA STREET  
SUITE 4310

City State Zip Code  
SAN FRANCISCO CA 94111-6134

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
SELF-EMPLOYED PRIVATE INVESTOR

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 15000.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2010

Transaction ID: SA11.49409

Amount of Each Receipt this Period  
15000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MR. REGIS LEACH, JR.

Mailing Address 306 BARBARA DRIVE

City State Zip Code  
MONONGAHELA PA 15063-1104

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
LONE PINE PROJECT MANAGER

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 400.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2010

Transaction ID: SA11.49101

Amount of Each Receipt this Period  
400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MR. PHILIP LEBHERZ

Mailing Address 1600 W. HILLSDALE BLVD.

City State Zip Code  
SAN MATEO CA 94402-3768

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
LEBHERZ INSURANCE SERVICES INC. C.E.O./INSURANCE

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 15000.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

Transaction ID: SA11.48133

Amount of Each Receipt this Period  
15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 30400.00

TOTAL This Period (last page this line number only)

1332074931

**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 241 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MRS. DORIS LEE

Mailing Address 611 WASHINGTON STREET  
SUITE 2204

City SAN FRANCISCO State CA Zip Code 94111-2105

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS  
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58938

Amount of Each Receipt this Period  
1250.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. THEODORE B. LEE

Mailing Address 611 WASHINGTON STREET  
SUITE 2204

City SAN FRANCISCO State CA Zip Code 94111-2105

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS  
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58976

Amount of Each Receipt this Period  
1250.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. RONALD E. LEHR

Mailing Address 10062 BRECKENRIDGE ROAD

City BAKERSFIELD State CA Zip Code 93307-9111

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

Name of Employer LEHR BROTHERS, INC.  
Occupation AG

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 13 / 2010

Transaction ID: SA11.39393

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ **3000.00**

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

10020734604

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

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

FOR LINE NUMBER: PAGE 242 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MR. GEORGE A. LEIVA

Mailing Address 475 LA LOMA ROAD

City State Zip Code  
PASADENA CA 91105-2426

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

Name of Employer Occupation  
OAKTREE CAPITAL MANAGING PARTNER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4800.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50740

Amount of Each Receipt this Period  
4800.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MRS. VALERIE LEIVA

Mailing Address 475 LA LOMA ROAD

City State Zip Code  
PASADENA CA 91105-2426

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 ▼ 4800.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50741

Amount of Each Receipt this Period  
4800.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MR. JOSEPH E. LENIHAN

Mailing Address 592 VIA ALMAR

City State Zip Code  
PALOS VERDES ESTAT CA 90274-1230

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

Name of Employer Occupation  
L.L. GOLF CORPORATION GOLF COURSE OWNERSHIP, PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58763

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... 12000.00

TOTAL This Period (last page this line number only) ..... 12000.00

1302073403

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

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

FOR LINE NUMBER: PAGE 243 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. MEG LENIHAN

Mailing Address 592 VIA ALMAR

City State Zip Code  
PALOS VERDES ESTAT CA 90274-1230

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 ▼  
2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58759

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. EDWARD M. LEONARD

Mailing Address 275 BATTERY STREET

City State Zip Code  
SAN FRANCISCO CA 94111-3305

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

Name of Employer Occupation  
SEVEN HILLS PARTNERS L.L.-C. INVESTMENT BANKER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2010

Transaction ID: SA11.40344

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

Mailing Address 1780 SWEDE ROAD

City State Zip Code  
BLUE BELL PA 19422-3522

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

Name of Employer Occupation  
STEVEN LEWIS ASSISTANT

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2010

Transaction ID: SA11.44127

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3900.00

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

10020734500

**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 244 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MS. BEVERLY J. LEWIS

Mailing Address 626 VIA LIDO NORD

City State Zip Code  
NEWPORT BEACH CA 92663-5521

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 ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

Transaction ID: SA11.48339

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. STEVEN M. LEWIS

Mailing Address 1780 SWEDE ROAD

City State Zip Code  
BLUE BELL PA 19422-3522

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

Name of Employer Occupation  
U.S. RESTAURANTS FRANCHISEE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2010

Transaction ID: SA11.44138

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MRS. ADRIANNA M. LEYENDEKKER

Mailing Address 9001 AVENUE 360

City State Zip Code  
VISALIA CA 93291-8947

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 ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2010

Transaction ID: SA11.33576

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2750.00

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

11020734607



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

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

FOR LINE NUMBER: PAGE 245 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. JAMES A. LICO Mailing Address 157 OCCIDENTAL LANE City State Zip Code BURLINGAME CA 94010-5219 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 08 / 26 / 2010 Transaction ID: SA11.29482 Amount of Each Receipt this Period 500.00 CONTRIBUTION	
	Name of Employer Occupation KIRKLAND & ELLIS LLP ATTORNEY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) MR. ELIAS LILIENTHAL Mailing Address 5949 VIA ZURITA City State Zip Code LA JOLLA CA 92037-6951 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 30 / 2010 Transaction ID: SA11.58931 Amount of Each Receipt this Period 500.00 CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED SELF-EMPLOYED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MR. LARRY LINDNER Mailing Address 10829 WOODSTREAM POINT City State Zip Code SAN DIEGO CA 92131-1560 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 30 / 2010 Transaction ID: SA11.58753 Amount of Each Receipt this Period 300.00 CONTRIBUTION	
	Name of Employer Occupation WELLS FARGO ADVISORS L.L.C. FINANCIAL ADVISOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional) ..... ▶ 1300.00	
	TOTAL This Period (last page this line number only) ..... ▶	

1002071491

**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 246 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. ANN M. LIVERMORE

Mailing Address 285 WOODSIDE DRIVE

City WOODSIDE State CA Zip Code 94062-2353

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

Name of Employer HEWLETT-PACKARD Occupation EXECUTIVE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 09 / 30 / 2010  
Transaction ID: SA11.58911  
Amount of Each Receipt this Period 12500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. THOMAS H. LIVERMORE

Mailing Address 285 WOODSIDE DRIVE

City WOODSIDE State CA Zip Code 94062-2353

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 ▼ 12500.00

Date of Receipt 09 / 30 / 2010  
Transaction ID: SA11.58972  
Amount of Each Receipt this Period 12500.00  
CONTRIBUTION

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

Mailing Address 120 NEWPORT CENTER DRIVE #220

City NEWPORT BEACH State CA Zip Code 92660-0916

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

Name of Employer RON LIVINGSTON GROUP Occupation EXECUTIVE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 09 / 02 / 2010  
Transaction ID: SA11.33517  
Amount of Each Receipt this Period 4800.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 29800.00

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

10020713400

**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 247 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. DARRELL LOENARD</b>	Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
Mailing Address <b>P.O. BOX 586</b>	Transaction ID: <b>SA11.49102</b>
City <b>EAST CARBON</b> State <b>UT</b> Zip Code <b>84520-0586</b>	Amount of Each Receipt this Period <b>390.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>UTAH AMERICAN ENERGY INC.</b> Occupation <b>COAL MINER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>390.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL D. LOIACONO</b>	Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
Mailing Address <b>7848 OAKRIDGE DRIVE</b>	Transaction ID: <b>SA11.49104</b>
City <b>MENTOR</b> State <b>OH</b> Zip Code <b>44060-7239</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>THE OHIO VALLEY COAL COMPANY</b> Occupation <b>ACCOUNTANT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. TERRY LONG</b>	Date of Receipt MM / DD / YYYY <b>09 / 21 / 2010</b>
Mailing Address <b>3 BLACKTHORN ROAD</b>	Transaction ID: <b>SA11.44110</b>
City <b>LAFAYETTE</b> State <b>CA</b> Zip Code <b>94549-3355</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>FINANCIAL SERVICES</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1890.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734610

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

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

FOR LINE NUMBER: PAGE 248 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

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

Mailing Address P.O. BOX 770-217

City State Zip Code  
PARK CITY UT 84060

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

Name of Employer Occupation  
KATALYST GLOBAL LOGISTICS TRANSPORTATION

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: SA11.38739

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

Mailing Address 26407 CLUB DRIVE

City State Zip Code  
MADERA CA 93638-0249

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

Name of Employer Occupation  
SELF-EMPLOYED FARMER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36401

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. RON E. LOPES

Mailing Address 26407 CLUB DRIVE

City State Zip Code  
MADERA CA 93638-0249

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

Name of Employer Occupation  
SELF-EMPLOYED FARMING

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36411

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2000.00

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

10020734611

**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 249 / 582
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MS. AYALA LOPEZ

Mailing Address P.O. BOX 187

City RIVERDALE State CA Zip Code 93656-0187

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

Name of Employer AYALA CORPORATION Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 09 / 03 / 2010

Transaction ID: SA11.33568

Amount of Each Receipt this Period 4800.00

CONTRIBUTION

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

Mailing Address 4 BRUMBY

City TRABUCO CANYON State CA Zip Code 92679-4949

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 ▼ 12400.00

Date of Receipt 09 / 02 / 2010

Transaction ID: SA11.33484

Amount of Each Receipt this Period 10000.00

CONTRIBUTION

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

Mailing Address 4 BRUMBY

City TRABUCO CANYON State CA Zip Code 92679-4949

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 ▼ 12400.00

Date of Receipt 09 / 16 / 2010

Transaction ID: SA11.42730

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 17200.00

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

10020734612

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 250 / 582
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MR. STEVE LOURENCO

Mailing Address 20377 ROAD 140

City State Zip Code  
TULARE CA 93274-9018

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

Name of Employer LOURENCO FARMS Occupation FARMER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

Transaction ID: SA11.36451

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. JOHN L. LOVE

Mailing Address P.O. BOX 305

City State Zip Code  
PEBBLE BEACH CA 93953-0305

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 ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2010

Transaction ID: SA11.27698

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MRS. NANCY M. LOVE

Mailing Address P.O. BOX 305

City State Zip Code  
PEBBLE BEACH CA 93953-0305

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

Name of Employer HOLISTIC PRACTITIONER Occupation ARTIST

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2010

Transaction ID: SA11.27671

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2500.00

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

10020734613

**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 251 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MS. ELIZABETH H. LOWE**

Mailing Address **709 LATIMER ROAD**

City **SANTA MONICA** State **CA** Zip Code **90402-1015**

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 ▼ **15000.00**

Date of Receipt **08 / 19 / 2010**

Transaction ID: **SA11.27574**

Amount of Each Receipt this Period **15000.00**

**CONTRIBUTION**

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

Mailing Address **316 MID VALLEY CENTER #272**

City **CARMEL** State **CA** Zip Code **93923-8516**

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

Name of Employer **P.L.A. CORPORATION** Occupation **ENGINEER**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 20 / 2010**

Transaction ID: **SA11.43617**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. CHRISTINE M. LUCCHETTI**

Mailing Address **P.O. BOX 419074**

City **RANCHO CORDOVA** State **CA** Zip Code **95741-9074**

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 ▼ **5000.00**

Date of Receipt **08 / 31 / 2010**

Transaction ID: **SA11.29722**

Amount of Each Receipt this Period **5000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **21000.00**

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

16020734614

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

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

FOR LINE NUMBER: PAGE 252 / 582  
(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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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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DAVID J. LUCCHETTI**

Mailing Address **P.O. BOX 419074**

City **RANCHO CORDOVA** State **CA** Zip Code **95741-9074**

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

Name of Employer **PACIFIC COAST COMPANIES, INC.** Occupation **PRESIDENT & C.E.O.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **08 / 31 / 2010**  
Transaction ID: **SA11.29757**  
Amount of Each Receipt this Period **5000.00**  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. GREGORY T. LUCIER**

Mailing Address **5791 VAN ALLEN WAY**

City **CARLSBAD** State **CA** Zip Code **92008-7321**

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

Name of Employer **LIFE TECHNOLOGIES** Occupation **CHAIRMAN & C.E.O.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 27 / 2010**  
Transaction ID: **SA11.49265**  
Amount of Each Receipt this Period **500.00**  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. NEAL A. LUCKETT**

Mailing Address **3006 WOODLAWN PLACE**

City **MARION** State **IL** Zip Code **62959-5541**

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

Name of Employer **OXFORD CRANE SERVICE** Occupation **ENGINEER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **09 / 29 / 2010**  
Transaction ID: **SA11.50657**  
Amount of Each Receipt this Period **750.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **6250.00**

**TOTAL** This Period (last page this line number only) ..... **6250.00**

10020734615



**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 253 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. HOMER LUYSTER</b>	Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
Mailing Address <b>201 MORGANTOWN AVENUE</b>	Transaction ID: <b>SA11.49107</b>
City <b>BARNESVILLE</b> State <b>OH</b> Zip Code <b>43713-9701</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>K &amp; J MACHINE INC</b> Occupation <b>EXECUTIVE</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. RAY L. LUYSTER</b>	Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
Mailing Address <b>336 HIGH STREET</b>	Transaction ID: <b>SA11.49106</b>
City <b>FLUSHING</b> State <b>OH</b> Zip Code <b>43977-9750</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HAMILTON AND ASSOCIATES</b> Occupation <b>EXECUTIVE</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. CHRISTINA LYON</b>	Date of Receipt MM / DD / YYYY <b>09 / 15 / 2010</b>
Mailing Address <b>4490 VON KARMAN AVENUE</b>	Transaction ID: <b>SA11.40312</b>
City <b>NEWPORT BEACH</b> State <b>CA</b> Zip Code <b>92660-2008</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734615

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

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

FOR LINE NUMBER: PAGE 254 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
GEN WILLIAM LYON  
Mailing Address P.O. BOX 8858

City State Zip Code  
NEWPORT BEACH CA 92658-8858

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

Name of Employer Occupation  
WILLIAM LYON HOMES CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30400.00

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

Transaction ID: SA11.35507

Amount of Each Receipt this Period  
30400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MR. WILLIAM H. LYON, JR.  
Mailing Address 4490 VON KARMAN AVENUE

City State Zip Code  
NEWPORT BEACH CA 92660-2008

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

Name of Employer Occupation  
WILLIAM LYON HOMES PRESIDENT & CHIEF OPERATING OFFICIER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2010

Transaction ID: SA11.40348

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MR. BILL LYONS  
Mailing Address 10555 MAZE BLVD.

City State Zip Code  
MODESTO CA 95358-9232

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

Name of Employer Occupation  
SELF-EMPLOYED RANCHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50791

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... 33300.00

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

10020734617

**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 255 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MS. MARY HECKER MACRAE

Mailing Address 236 SEA VIEW AVENUE

City State Zip Code  
PIEDMONT CA 94610-1249

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

Name of Employer SELF-EMPLOYED Occupation DESIGNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

Transaction ID: SA11.47361

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 10 SCHNAKE LANE  
BIG BUCK CONSTRUCTION INC.

City State Zip Code  
EL DORADO IL 62930-3469

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

Name of Employer BIG BUCK CONSTRUCTION INC. Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2010

Transaction ID: SA11.49108

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. KENT I. MADSEN

Mailing Address 1490 FEDERAL HEIGHTS DRIVE

City State Zip Code  
SALT LAKE CITY UT 84103-4444

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

Name of Employer EPIC VENTURES Occupation VENTURE CAPITALIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

Transaction ID: SA11.38946

Amount of Each Receipt this Period  
1200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2200.00

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

200907141513

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

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

FOR LINE NUMBER: PAGE 256 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. DEBORAH J. MAGOWAN Mailing Address 2100 WASHINGTON ST City SAN FRANCISCO State CA Zip Code 94109-2845 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 07 / 30 / 2010 Transaction ID: SA11.26326 Amount of Each Receipt this Period 30400.00 CONTRIBUTION
Name of Employer: SELF Occupation: INVESTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 30400.00		
<b>B.</b> Full Name (Last, First, Middle Initial) MR. PETER A. MAGOWAN Mailing Address 2100 WASHINGTON ST City SAN FRANCISCO State CA Zip Code 94109-2845 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 07 / 30 / 2010 Transaction ID: SA11.26325 Amount of Each Receipt this Period 30400.00 CONTRIBUTION
Name of Employer: RETIRED Occupation: RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 30400.00		
<b>C.</b> Full Name (Last, First, Middle Initial) CHRISTINA MAHONEY Mailing Address P.O. BOX 788 City RIO VISTA State CA Zip Code 94571-0788 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 09 / 2010 Transaction ID: SA11.38731 Amount of Each Receipt this Period 5000.00 CONTRIBUTION
Name of Employer: R EMIGH LIVESTOCK Occupation: PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		
SUBTOTAL of Receipts This Page (optional) ..... ▶		65800.00
TOTAL This Period (last page this line number only) ..... ▶		

10020734510

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

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

FOR LINE NUMBER: PAGE 257 / 582

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MR. ROBERT W. MAIER</b> Mailing Address <b>2206 GREEN STREET</b> City <b>SAN FRANCISCO</b> State <b>CA</b> Zip Code <b>94123-4710</b> FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y <b>09 / 21 / 2010</b>
	Transaction ID: <b>SA11.44108</b> Amount of Each Receipt this Period <b>1000.00</b>
	CONTRIBUTION
	Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>1000.00</b>
<b>B.</b> Full Name (Last, First, Middle Initial) <b>MRS. CAROL MALOUF</b> Mailing Address <b>44 RUE FONTAINBLEAU</b> City <b>NEWPORT BEACH</b> State <b>CA</b> Zip Code <b>92660-5905</b> FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y <b>09 / 29 / 2010</b>
	Transaction ID: <b>SA11.50748</b> Amount of Each Receipt this Period <b>500.00</b>
	CONTRIBUTION
	Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>500.00</b>
<b>C.</b> Full Name (Last, First, Middle Initial) <b>MR. JOSEPH MANDATO</b> Mailing Address <b>82 MONTE VISTA AVENUE</b> City <b>ATHERTON</b> State <b>CA</b> Zip Code <b>94027-5431</b> FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y <b>09 / 20 / 2010</b>
	Transaction ID: <b>SA11.43566</b> Amount of Each Receipt this Period <b>500.00</b>
	CONTRIBUTION
	Name of Employer <b>DE NONO VENTURES</b> Occupation <b>VENTURE CAPITAL</b> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>500.00</b>
SUBTOTAL of Receipts This Page (optional) ..... ▶ <b>2000.00</b>	
TOTAL This Period (last page this line number only) ..... ▶	

100020734520

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

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

FOR LINE NUMBER: PAGE 258 / 582

(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)  
CARLY VICTORY COMMITTEE

**A.**

Full Name (Last, First, Middle Initial) MR. ANDREW MERVYN MANDELBAUM		Date of Receipt MM / DD / YYYY 08 / 24 / 2010	
Mailing Address 506 HILLGREEN DRIVE		Transaction ID: SA11.28210	
City BEVERLY HILLS	State CA	Zip Code 90212-4110	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer P.V.H. NECKWEAR	Occupation EXECUTIVE	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) MRS. JILLIAN MANUS		Date of Receipt MM / DD / YYYY 09 / 20 / 2010	
Mailing Address 425 SHERMAN AVENUE SUITE 200		Transaction ID: SA11.43565	
City PALO ALTO	State CA	Zip Code 94306-1850	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer MANUS & ASSOCIATES	Occupation PRESIDENT/LITERARY/MEDIA AGENT	Aggregate Year-to-Date 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) MR. ARMAS C. MARKKULA, JR.		Date of Receipt MM / DD / YYYY 09 / 16 / 2010	
Mailing Address 179 KINGS MOUNTAIN ROAD		Transaction ID: SA11.42761	
City WOODSIDE	State CA	Zip Code 94062-3613	Amount of Each Receipt this Period 2400.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	Aggregate Year-to-Date 2400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) .....	3900.00
TOTAL This Period (last page this line number only) .....	

12041521

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

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

FOR LINE NUMBER: PAGE 259 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. LINDA K. MARKKULA

Mailing Address 179 KINGS MOUNTAIN ROAD

City State Zip Code  
WOODSIDE CA 94062-3613

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 ▼  
2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

Transaction ID: SA11.42731

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. HOWARD S. MARKS

Mailing Address 333 S. GRAND AVENUE

City State Zip Code  
LOS ANGELES CA 90071-1504

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

Name of Employer Occupation  
OAKTREE CAPITAL MANAGEMENT INVESTMENTS

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt  
MM / DD / YYYY  
08 / 26 / 2010

Transaction ID: SA11.29474

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
DR. STEPHEN S. MARMER

Mailing Address 11611 SAN VICENTE BLVD.

City State Zip Code  
LOS ANGELES CA 90049-5106

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

Name of Employer Occupation  
SELF-EMPLOYED PSYCHIATRIST

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 31 / 2010

Transaction ID: SA11.29750

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5800.00**

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

10020734622

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

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

FOR LINE NUMBER: PAGE 260 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MS. DARCY C. MARSHALL**

Mailing Address **7518 BUENA VISTA ROAD**

City **BAKERSFIELD** State **CA** Zip Code **93311**

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 ▼ **32000.00**

Date of Receipt **09 / 03 / 2010**  
Transaction ID: **SA11.33566**  
Amount of Each Receipt this Period **32000.00**  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. EDMUND D. MARSHALL**

Mailing Address **10261 N. SCOTTSDALE**

City **SCOTTSDALE** State **AZ** Zip Code **85253-1424**

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

Name of Employer **E.D. MARSHALL INC.** Occupation **JEWELRY SALES**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2300.00**

Date of Receipt **09 / 20 / 2010**  
Transaction ID: **SA11.43610**  
Amount of Each Receipt this Period **2300.00**  
**CONTRIBUTION**

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

Mailing Address **1330 UNIVERSITY DRIVE #23**

City **MENLO PARK** State **CA** Zip Code **94025-4241**

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

Name of Employer **SELBY VENTURE PARTNERS** Occupation **FINANCIAL SERVICE**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 10 / 2010**  
Transaction ID: **SA11.38942**  
Amount of Each Receipt this Period **1000.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **35300.00**

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

1302073423



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 261 / 582
	(check only one)
<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MS. MYRNA MARSTON**

Mailing Address **2066 HISTORIC DECATUR ROAD**

City **SAN DIEGO** State **CA** Zip Code **92106-6061**

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 ▼ **1500.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50604**

Amount of Each Receipt this Period **1500.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. DALE R. MARTIN**

Mailing Address **3187 ST. HIGHWAY 148**

City **MULKEYTOWN** State **IL** Zip Code **62865-3207**

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

Name of Employer **C.S.I./C.M.I.** Occupation **PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50661**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

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

Mailing Address **62930 AULT ROAD**

City **BELMONT** State **OH** Zip Code **43718-9602**

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

Name of Employer **OHIO VALLEY COAL COMPANY** Occupation **COAL MINER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50660**

Amount of Each Receipt this Period **300.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **2300.00**

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

10020734524

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

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

FOR LINE NUMBER: PAGE 262 / 582  
(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. JAMES K. MARTIN Mailing Address 2605 W. WRENWOOD City FRESNO State CA Zip Code 93711-2557 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer CAL WEST RAIN Occupation BUSINESS MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00	Date of Receipt MM / DD / YYYY 08 / 26 / 2010 Transaction ID: SA11.29404 Amount of Each Receipt this Period 3000.00 CONTRIBUTION		
	<b>B.</b> Full Name (Last, First, Middle Initial) MS. JANET MARTIN Mailing Address 2 NORTH FACE City SLOATSBURG State NY Zip Code 10974-2656 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer HOWARD P. MILSTEIN Occupation CHIEF ADMINISTRATIVE OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00	Date of Receipt MM / DD / YYYY 09 / 22 / 2010 Transaction ID: SA11.45248 Amount of Each Receipt this Period 10000.00 CONTRIBUTION	
		<b>C.</b> Full Name (Last, First, Middle Initial) MR. C. THOMAS MARTZ Mailing Address P.O. BOX 190982 City SAN FRANCISCO State CA Zip Code 94119-0982 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BAY AREA SPORT'S HALL OF FAME Occupation PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	Date of Receipt MM / DD / YYYY 09 / 20 / 2010 Transaction ID: SA11.43582 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
			SUBTOTAL of Receipts This Page (optional) ..... ▶ 14000.00
TOTAL This Period (last page this line number only) ..... ▶			

10020734623

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

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

FOR LINE NUMBER: PAGE 263 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MR. MICHAEL D. MARVEL

Mailing Address 4298 MARVEL ROAD

City State Zip Code  
THOMPSONVILLE IL 62890

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

Name of Employer Occupation  
SELF-EMPLOYED OWNER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50662

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MRS. LULETA MASLAK

Mailing Address P.O. BOX 1730

City State Zip Code  
VAIL CO 81658-1730

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 ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 27 / 2010

Transaction ID: SA11.29540

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MR. SAMUEL H. MASLAK

Mailing Address P.O. BOX 1730

City State Zip Code  
VAIL CO 81658-1730

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 ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 27 / 2010

Transaction ID: SA11.29544

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... 10500.00

TOTAL This Period (last page this line number only) ..... 10500.00

10020734629

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

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

FOR LINE NUMBER: PAGE 264 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DAVID RICHARD MASSON

Mailing Address P.O. BOX 132

City

VERSAILLES

State

KY

Zip Code

40383-0132

FEC ID number of contributing federal political committee.

C

Name of Employer  
GOLDEN AGE FARM

Occupation  
FARMER

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

MM / DD / YYYY  
09 / 22 / 2010

Transaction ID: SA11.45286

Amount of Each Receipt this Period

4800.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. SUE ANN MASSON

Mailing Address P.O. BOX 132

City

VERSAILLES

State

KY

Zip Code

40383-0132

FEC ID number of contributing federal political committee.

C

Name of Employer  
GOLDEN AGE FARM

Occupation  
OWNER

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

MM / DD / YYYY  
09 / 22 / 2010

Transaction ID: SA11.45276

Amount of Each Receipt this Period

4800.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHARLES MATHEWS, JR.

Mailing Address 8800 MATHEWS LANE

City

MARYSVILLE

State

CA

Zip Code

95901-9126

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation  
RICE FARMER

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
09 / 16 / 2010

Transaction ID: SA11.42713

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

9850.00

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

10020734527

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

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

FOR LINE NUMBER: PAGE 265 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MR. CHARLEY MATHEWS, JR.

Mailing Address 9000 MATHEWS LANE

City State Zip Code  
MARYSVILLE CA 95901-9102

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

Name of Employer Occupation  
C. & H. FARMING FARMER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

Transaction ID: SA11.42714

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MR. BILLY J. MATHIS

Mailing Address 3434 WEST RENO AVENUE

City State Zip Code  
OKLAHOMA CITY OK 73107-6134

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

Name of Employer Occupation  
MATHIS BROTHERS FURNITURE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

Transaction ID: SA11.38924

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MR. DUNCAN L. MATTESON

Mailing Address ONE LAGOON DRIVE  
SUITE 200

City State Zip Code  
REDWOOD CITY CA 94065-5177

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

Name of Employer Occupation  
THE MATTESON COMPANIES REAL ESTATE INVESTMENTS

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

Transaction ID: SA11.38943

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

4650.00

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

1002071442

**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 266 / 582
<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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. JENNIFER MATTEOLI Mailing Address 2535 DUNCAN ROAD		Date of Receipt MM / DD / YYYY 09 / 17 / 2010
City State Zip Code YUBA CITY CA 95993-9737		Transaction ID: SA11.43496
FEC ID number of contributing federal political committee. C [ ]		Amount of Each Receipt this Period 250.00
Name of Employer Occupation MATTEOLI BROTHERS LAWYER		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

<b>B.</b> Full Name (Last, First, Middle Initial) MR. LANCE MATTEOLI Mailing Address 2535 DUNCAN ROAD		Date of Receipt MM / DD / YYYY 09 / 17 / 2010
City State Zip Code YUBA CITY CA 95993-9737		Transaction ID: SA11.43500
FEC ID number of contributing federal political committee. C [ ]		Amount of Each Receipt this Period 250.00
Name of Employer Occupation SELF-EMPLOYED FARMER		CONTRIBUTION
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) MR. RICHARD L. MATTEIS Mailing Address 3350 CENTRAL AVENUE		Date of Receipt MM / DD / YYYY 09 / 16 / 2010
City State Zip Code ROSEVILLE CA 95747-9226		Transaction ID: SA11.42716
FEC ID number of contributing federal political committee. C [ ]		Amount of Each Receipt this Period 1000.00
Name of Employer Occupation CALIFORNIA FARM BUREAU ASSOCIATION EXECUTIVE		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) .....	1500.00
TOTAL This Period (last page this line number only) .....	

10020734629

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

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

FOR LINE NUMBER: PAGE 267 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES MATTHEWS, JR.**

Mailing Address **8901 MATHEWS LANE**

City **MARYSVILLE** State **CA** Zip Code **95901-9126**

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

Name of Employer **SELF-EMPLOYED** Occupation **RICE FARMER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 09 / 2010**  
Transaction ID: SA11.38700  
Amount of Each Receipt this Period **250.00**  
**CONTRIBUTION**

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

Mailing Address **8901 MATHEWS LANE**

City **MARYSVILLE** State **CA** Zip Code **95901-9126**

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

Name of Employer **SELF-EMPLOYED** Occupation **RICE FARMER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 09 / 2010**  
Transaction ID: SA11.38686  
Amount of Each Receipt this Period **250.00**  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. RODGAR MCCALMON, SR.**

Mailing Address **5318 LAUREL RIDGE COURT**

City **FAIRFIELD** State **CA** Zip Code **94534-6786**

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

Name of Employer **SELF-EMPLOYED** Occupation **PASTOR**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **09 / 24 / 2010**  
Transaction ID: SA11.48315  
Amount of Each Receipt this Period **5000.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **5500.00**

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

1002073430

**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 268 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MR. JAMES A. MCCARTHY</b>	Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
	Mailing Address <b>2100 PACIFIC AVENUE #7B</b>	Transaction ID: <b>SA11.47376</b>
	City State Zip Code <b>SAN FRANCISCO CA 94115-1546</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation <b>RETIRED RETIRED</b>	Aggregate Year-to-Date <b>500.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MRS. JUNE G. MCCARTHY</b>	Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
	Mailing Address <b>2100 PACIFIC AVENUE #7B</b>	Transaction ID: <b>SA11.47363</b>
	City State Zip Code <b>SAN FRANCISCO CA 94115-1546</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation <b>HOMEMAKER HOMEMAKER</b>	Aggregate Year-to-Date <b>500.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. CRAIG O. MCCAWE</b>	Date of Receipt MM / DD / YYYY <b>08 / 27 / 2010</b>
	Mailing Address <b>2300 CARILLON PT</b>	Transaction ID: <b>SA11.29535</b>
	City State Zip Code <b>KIRKLAND WA 98033-7445</b>	Amount of Each Receipt this Period <b>15000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation <b>EAGLE RIVER EXECUTIVE</b>	Aggregate Year-to-Date <b>15000.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>16000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734931



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

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

FOR LINE NUMBER: PAGE 269 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. HAROLD MCCLARTY</b>		Date of Receipt MM / DD / YYYY <b>08 / 24 / 2010</b>
Mailing Address <b>13138 S. BETHEL</b>		Transaction ID: SA11.28189
City <b>KINGSBURG</b>	State <b>CA</b>	Zip Code <b>93631-9216</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>H.M.C. FARMS</b>	Occupation <b>FARMER</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. SCOTT R. MCCLAVE</b>		Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
Mailing Address <b>26 CORPORATE REAL ESTATE SUITE 200</b>		Transaction ID: SA11.47379
City <b>IRVINE</b>	State <b>CA</b>	Zip Code <b>92606</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>THE BASCOM GROUP</b>	Occupation <b>COMMERCIAL REAL ESTATE</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. AUBREY K. MCCLENDON</b>		Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
Mailing Address <b>P.O. BOX 18756</b>		Transaction ID: SA11.33499
City <b>OKLAHOMA CITY</b>	State <b>OK</b>	Zip Code <b>73154-0756</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>4800.00</b>
Name of Employer <b>CHESEPEAKE ENERGY</b>	Occupation <b>CEO</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>4800.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>7450.00</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: (check only one)	PAGE 270 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MRS. BETSY MCCLENDON	Date of Receipt MM / DD / YYYY 09 / 13 / 2010
Mailing Address 1 E. ROSELAND DRIVE	Transaction ID: SA11.39356
City LA JOLLA      State CA      Zip Code 92037-4014	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer DESIGNS BY BETSY      Occupation INTERIOR DESIGNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

**B.**

Full Name (Last, First, Middle Initial) MR. SCOTT MCCLENDON	Date of Receipt MM / DD / YYYY 09 / 13 / 2010
Mailing Address 1 E. ROSELAND DRIVE	Transaction ID: SA11.39361
City LA JOLLA      State CA      Zip Code 92037-4014	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer SELF-EMPLOYED      Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

**C.**

Full Name (Last, First, Middle Initial) MS. MEG MCCOMB	Date of Receipt MM / DD / YYYY 09 / 10 / 2010
Mailing Address 21862 SEACREST LANE	Transaction ID: SA11.38988
City HUNTINGTON BEACH      State CA      Zip Code 92646-8226	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer MCCOMB INSURANCE SERVICES      Occupation INSURANCE BROKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734033

**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 271 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. PATRICK W. MCDIVITT

Mailing Address 2089 RIDGE DRIVE

City LOS ANGELES State CA Zip Code 90049-6804

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

Name of Employer TRIMSCIL CAPITAL MANAGEME-NT INC. Occupation PRINCIPAL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 09 / 08 / 2010  
Transaction ID: SA11.36422  
Amount of Each Receipt this Period 1400.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. CHAD T. MCDOUGALL

Mailing Address 14909 LAURIN LANE

City OKLAHOMA CITY State OK Zip Code 73142-1913

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

Name of Employer J.M.A. ENERGY COMPANY, L.-L.C. Occupation VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 02 / 2010  
Transaction ID: SA11.33494  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. JEFFREY J. MCDOUGALL

Mailing Address 1021 NW GRAND BLVD.

City OKLAHOMA CITY State OK Zip Code 73118-6039

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

Name of Employer J.M.A. ENERGY COMPANY Occupation PRESIDENT/OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 02 / 2010  
Transaction ID: SA11.33495  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3400.00

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

1103071445

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

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

FOR LINE NUMBER: PAGE 272 / 582

(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)  
CARLY VICTORY COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) MR. RICHARD LOUIS MCGANNON</p> <p>Mailing Address 139 VALLEY OAKS DRIVE</p> <p>City ALAMO State CA Zip Code 94507-2007</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 24 / 2010</p> <p>Transaction ID: SA11.48323</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) MS. DIANE M. MCGLINCHEY</p> <p>Mailing Address 19266 SEABROOK CIRCLE</p> <p>City HUNTINGTON BEACH State CA Zip Code 92648-5520</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer RETIRED Occupation RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 23 / 2010</p> <p>Transaction ID: SA11.47332</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) MR. MARK MCKEAN</p> <p>Mailing Address P.O. BOX 445</p> <p>City RIVERDALE State CA Zip Code 93656-0445</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer SELF-EMPLOYED Occupation FARMER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2400.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 08 / 2010</p> <p>Transaction ID: SA11.36376</p> <p>Amount of Each Receipt this Period 2400.00</p> <p>CONTRIBUTION</p>
<p>SUBTOTAL of Receipts This Page (optional) .....</p>		<p>3650.00</p>
<p>TOTAL This Period (last page this line number only) .....</p>		

1002073141

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

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

FOR LINE NUMBER: PAGE 273 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. JOHN M. MCMAHON Mailing Address 4824 RUGBY AVENUE		Date of Receipt MM / DD / YYYY 09 / 23 / 2010 Transaction ID: SA11.47371 Amount of Each Receipt this Period 2400.00 CONTRIBUTION	
City State Zip Code BETHESDA MD 20814-3019	FEC ID number of contributing federal political committee. C	Name of Employer MILLER & LONG CO., INC. Occupation CHAIRMAN	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.00
<b>B.</b> Full Name (Last, First, Middle Initial) MR. JOHN H. MCMANUS Mailing Address 32 SOUTHWOOD DRIVE		Date of Receipt MM / DD / YYYY 09 / 15 / 2010 Transaction ID: SA11.40313 Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
City State Zip Code ORINDA CA 94563-3011	FEC ID number of contributing federal political committee. C	Name of Employer CUSHMAN & WAKEFIELD Occupation COMMERCIAL REAL ESTATE	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) MRS. ANN K. MCMURTRY Mailing Address 620 SAND HILL ROAD #323F		Date of Receipt MM / DD / YYYY 08 / 23 / 2010 Transaction ID: SA11.27716 Amount of Each Receipt this Period 7500.00 CONTRIBUTION	
City State Zip Code PALO ALTO CA 94304-2620	FEC ID number of contributing federal political committee. C	Name of Employer HOMEMAKER Occupation HOMEMAKER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 7500.00
SUBTOTAL of Receipts This Page (optional) ..... ▶		10900.00	
TOTAL This Period (last page this line number only) ..... ▶		[ ]	

10020714611

**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 274 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. BURTON J. MCMURTRY

Mailing Address 620 SAND HILL ROAD #323F

City Palo Alto State CA Zip Code 94304-2620

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 ▼ 7500.00

Date of Receipt 08 / 23 / 2010

Transaction ID: SA11.27719

Amount of Each Receipt this Period 7500.00

CONTRIBUTION

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

Mailing Address P.O. BOX 801827

City DALLAS State TX Zip Code 75380-1827

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

Name of Employer MCNEIL PROPERTIES Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 08 / 2010

Transaction ID: SA11.36432

Amount of Each Receipt this Period 1200.00

CONTRIBUTION

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

Mailing Address 1001 CALIFORNIA STREET #6

City SAN FRANCISCO State CA Zip Code 94108-2203

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 ▼ 1200.00

Date of Receipt 09 / 08 / 2010

Transaction ID: SA11.36426

Amount of Each Receipt this Period 1200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 9900.00

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

1002073437

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

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

FOR LINE NUMBER: PAGE 275 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MS. ELISABETH MEAD**

Mailing Address **6849 BROADWAY TERRACE**

City **OAKLAND** State **CA** Zip Code **94611-1906**

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 ▼ **500.00**

Date of Receipt **09 / 08 / 2010**  
Transaction ID: SA11.36427  
Amount of Each Receipt this Period **500.00**  
**CONTRIBUTION**

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

Mailing Address **152 ELIZABETH AVENUE**

City **POWHATAN POINT** State **OH** Zip Code **43942-1347**

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

Name of Employer **OHIO VALLEY COAL** Occupation **PREP PLANT MANAGER**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 27 / 2010**  
Transaction ID: SA11.49120  
Amount of Each Receipt this Period **250.00**  
**CONTRIBUTION**

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

Mailing Address **1 OAK HOLLOW**

City **YUBA CITY** State **CA** Zip Code **95991-6273**

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

Name of Employer **MEAGHER TOMLINSON COMPANY** Occupation **PARTNER**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt **09 / 16 / 2010**  
Transaction ID: SA11.42764  
Amount of Each Receipt this Period **375.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1125.00**

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

10020734633

**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 276 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MRS. STACY MEAGHER</b>	Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>
Mailing Address <b>1 OAK HOLLOW</b>	Transaction ID: <b>SA11.42754</b>
City <b>YUBA CITY</b> State <b>CA</b> Zip Code <b>95991-6273</b>	Amount of Each Receipt this Period <b>375.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>COSMOTOLOGIST</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>375.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. JEFF MEGER</b>	Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>
Mailing Address <b>10915 RAMSGATE WAY</b>	Transaction ID: <b>SA11.27695</b>
City <b>BAKERSFIELD</b> State <b>CA</b> Zip Code <b>93311-2936</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>GRIMMWAY ENT., INC.</b> Occupation <b>PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. G. MICHAEL MEIGHEN</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>2615 WHITLOW DRIVE</b>	Transaction ID: <b>SA11.50670</b>
City <b>EVANSVILLE</b> State <b>IN</b> Zip Code <b>47725-6832</b>	Amount of Each Receipt this Period <b>300.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>MURRAY ENERGY CORPORATION</b> Occupation <b>CORPORATE SAFETY DIRECTOR</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>300.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1675.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002074133



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 277 / 582
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. PAUL M. MELANKO, JR.

Mailing Address 3485 PROSPECT

City SHADYSIDE State OH Zip Code 43947-1141

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 ▼ 800.00

Date of Receipt 09 / 27 / 2010

Transaction ID: SA11.49122

Amount of Each Receipt this Period 800.00

CONTRIBUTION

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

Mailing Address 600 CHERRY BLOSSOM WAY

City BRIDGEVILLE State PA Zip Code 15017-1178

FEC ID number of contributing federal political committee. **C**

Name of Employer MEMMO CONTRACTING Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2010

Transaction ID: SA11.49123

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. TOM MENDES

Mailing Address 18607 S. FRUIT

City RIVERDALE State CA Zip Code 93656-9431

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation DAIRY FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 09 / 2010

Transaction ID: SA11.38684

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2800.00

TOTAL This Period (last page this line number only) ..... ▶

1002074440

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 278 / 582

(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. MARSHALL MERRIFIELD**

Mailing Address **5191 SEAGROVE PLACE**

City State Zip Code  
**SAN DIEGO CA 92130-3229**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**CLARK SECURITY PRODUCTION C.E.O.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt

**09 / 15 / 2010**

Transaction ID: **SA11.40347**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MRS. VIRGINIA MERRIFIELD**

Mailing Address **5191 SEAGROVE PLACE**

City State Zip Code  
**SAN DIEGO CA 92130-3229**

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 ▼  
**500.00**

Date of Receipt

**09 / 15 / 2010**

Transaction ID: **SA11.40314**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MR. ALEX MERUELO**

Mailing Address **3 RIM RIDGE**

City State Zip Code  
**NEWPORT COAST CA 92657-1715**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**MERUELO ENTERPRISES PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**15000.00**

Date of Receipt

**08 / 25 / 2010**

Transaction ID: **SA11.28227**

Amount of Each Receipt this Period

**15000.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

**16000.00**

TOTAL This Period (last page this line number only) ▶

1302073434

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 279 / 582	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. LISET MERUELO

Mailing Address 3 RIM RIDGE

City Newport Coast State CA Zip Code 92657-1715

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 ▼ 15000.00

Date of Receipt: 08 / 19 / 2010  
Transaction ID: SA11.27692  
Amount of Each Receipt this Period: 15000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. PAUL P. MESPLE

Mailing Address 7443 N. MILLBROOK

City FRESNO State CA Zip Code 93720-3234

FEC ID number of contributing federal political committee. **C**

Name of Employer: MESPLE FARMS Occupation: FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 26 / 2010  
Transaction ID: SA11.29464  
Amount of Each Receipt this Period: 1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. HAROLD M. MESSMER, JR.

Mailing Address 2884 SAND HILL ROAD #200

City MENLO PARK State CA Zip Code 94025-7072

FEC ID number of contributing federal political committee. **C**

Name of Employer: ROBERT HALF INTERNATIONAL Occupation: CHAIRMAN/CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt: 09 / 30 / 2010  
Transaction ID: SA11.58974  
Amount of Each Receipt this Period: 2600.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 18600.00

TOTAL This Period (last page this line number only) ..... ▶

13020744342

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 280 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MRS. MARCIA MESSMER

Mailing Address 2884 SAND HILL ROAD #200

City State Zip Code  
MENLO PARK CA 94025-7072

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 ▼  
2600.00

Date of Receipt

MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58921

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MR. BRUCE MEYER

Mailing Address 333 S. GRAND AVE.  
SUITE 5033

City State Zip Code  
LOS ANGELES CA 90071-1504

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
GIBSON, DUNN & CRUTCHER LLP ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt

MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58919

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MS. JENNIFER MEYER

Mailing Address 6919 AVONDALE COURT

City State Zip Code  
OKLAHOMA CITY OK 73116-5008

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
LOVE'S TRAVEL STOPS, INC. DIRECTOR OF COMMUNICATIONS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4800.00

Date of Receipt

MM / DD / YYYY  
09 / 02 / 2010

Transaction ID: SA11.33461

Amount of Each Receipt this Period

4800.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) .....

9800.00

TOTAL This Period (last page this line number only) .....

1002071449

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 281 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MR. JOHN MEYER

Mailing Address **6919 AVONDALE COURT**

City **OKLAHOMA CITY** State **OK** Zip Code **73116-5008**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **APPRAISER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4800.00**

Date of Receipt **09 / 02 / 2010**  
Transaction ID: SA11.33462  
Amount of Each Receipt this Period **4800.00**  
CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. STEPHEN P. MEYER

Mailing Address **1312 CALLE SCOTT**

City **ENCINITAS** State **CA** Zip Code **92024-5531**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TECHNOLOGY ASSOCIATES** Occupation **C.O.O.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 21 / 2010**  
Transaction ID: SA11.44125  
Amount of Each Receipt this Period **500.00**  
CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MRS. CAROL MILLER

Mailing Address **90 BOND LANE**

City **TIBURON** State **CA** Zip Code **94920-1007**

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 **09 / 24 / 2010**  
Transaction ID: SA11.48274  
Amount of Each Receipt this Period **1000.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... **6300.00**

**TOTAL** This Period (last page this line number only) ..... **6300.00**

1002072424

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 282 / 582
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. CLINT MILLER

Mailing Address P.O. BOX 399

City State Zip Code  
WATSONVILLE CA 95077-0399

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
MM / DD / YYYY  
09 / 02 / 2010

Transaction ID: SA11.33530

Amount of Each Receipt this Period  
1200.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. DANIEL D. MILLER

Mailing Address 2510 W. BORDER LINKS DRIVE

City State Zip Code  
VISALIA CA 93291-4314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
CAL AGRIO SEED SEED SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50835

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. DAVID L. MILLER

Mailing Address 804 N. SILVERVALE

City State Zip Code  
VISALIA CA 93291-4252

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 ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2010

Transaction ID: SA11.30359

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1750.00

TOTAL This Period (last page this line number only) ..... ▶

1002074445

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 283 / 582

(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)  
CARLY VICTORY COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
MR. DAVID L. MILLER

Mailing Address 804 N. SILVERVALE

City VISALIA State CA Zip Code 93291-4252

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 ▼ 300.00

Date of Receipt 09 / 29 / 2010

Transaction ID: SA11.50824

Amount of Each Receipt this Period 250.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MS. DIANE D. MILLER

Mailing Address 1080 CHESTNUT STREET

City SAN FRANCISCO State CA Zip Code 94109-1240

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation WINERY OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2010

Transaction ID: SA11.43588

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MRS. JUNE W. MILLER

Mailing Address 9614 STERN LANE

City BROWNS VALLEY State CA Zip Code 95918-9707

FEC ID number of contributing federal political committee. **C**

Name of Employer GARY MILLER REALTY, INC. Occupation REALTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 20 / 2010

Transaction ID: SA11.43578

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1750.00

TOTAL This Period (last page this line number only) ..... ▶

10020734645

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 284 / 582  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. KAREN MILLER

Mailing Address P.O. BOX 399

City WATSONVILLE State CA Zip Code 95077-0399

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 02 / 2010  
Transaction ID: SA11.33529  
Amount of Each Receipt this Period 1200.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MRS. MARGARET MILLER

Mailing Address 2510 W. BORDER LINKS DRIVE

City VISALIA State CA Zip Code 93291-4314

FEC ID number of contributing federal political committee. **C**

Name of Employer CAL-AGRO SEED COMPANY Occupation CHAIRMAN OF THE BOARD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2010  
Transaction ID: SA11.50826  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. O'MALLEY M. MILLER

Mailing Address 355 S. GRAND AVENUE  
35TH FLOOR

City LOS ANGELES State CA Zip Code 90071-3161

FEC ID number of contributing federal political committee. **C**

Name of Employer MUNSER, TOLLES & OLSON, L.L.P. Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2010  
Transaction ID: SA11.45214  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2700.00

TOTAL This Period (last page this line number only) ..... ▶

10020734547



**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 285 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. SAMUEL V. MILLER**

Mailing Address **90 BOND LANE**

City **TIBURON** State **CA** Zip Code **94920-1007**

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 **09 / 24 / 2010**

Transaction ID: **SA11.48286**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. BRYAN MIN**

Mailing Address **8032 ENTRADA DE LUZ W.**

City **SAN DIEGO** State **CA** Zip Code **92127-2513**

FEC ID number of contributing federal political committee. **C**

Name of Employer **EPSILON SYSTEMS SOLUTIONS INC.** Occupation **C.E.O.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 20 / 2010**

Transaction ID: **SA11.43570**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. GAREY MITCHELL**

Mailing Address **9061 U.S. HIGHWAY 60 W.**

City **STURGIS** State **KY** Zip Code **42459-7507**

FEC ID number of contributing federal political committee. **C**

Name of Employer **T.A.C.C.** Occupation **MANAGER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50673**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1750.00**

**TOTAL** This Period (last page this line number only) ..... ▶

33  
44  
55  
66  
77  
88  
99  
00  
11

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 286 / 582

(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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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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. BRENDA MITTELMAN Mailing Address 12100 KATE DRIVE City LOS ALTOS State CA Zip Code 94022-5147 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 21 / 2010 Transaction ID: SA11.44117 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
Name of Employer HOMEMAKER Occupation 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) MRS. BRENDA MITTELMAN Mailing Address 12100 KATE DRIVE City LOS ALTOS State CA Zip Code 94022-5147 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 21 / 2010 Transaction ID: SA11.44118 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
Name of Employer HOMEMAKER Occupation 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) MRS. FAN MOBERG Mailing Address 760 EL CERRITO AVENUE City HILLSBOROUGH State CA Zip Code 94010-6950 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 29 / 2010 Transaction ID: SA11.50854 Amount of Each Receipt this Period 500.00 CONTRIBUTION
Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		
SUBTOTAL of Receipts This Page (optional) ..... ▶		2500.00
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 287 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. JIMMY R. MOBERG

Mailing Address 760 EL CERRITO AVENUE

City Hillsborough State CA Zip Code 94010-6950

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 ▼ 500.00

Date of Receipt 09 / 29 / 2010  
Transaction ID: SA11.50870  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. WILLIAM A. MOHLER

Mailing Address 1900 BULLOCKTOWN ROAD

City Boonville State IN Zip Code 47601-9016

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 ▼ 500.00

Date of Receipt 09 / 27 / 2010  
Transaction ID: SA11.49125  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. ANTHONY R. MOISO

Mailing Address P.O. BOX 9

City San Juan Capistran State CA Zip Code 92693-0009

FEC ID number of contributing federal political committee. **C**

Name of Employer RANCHO MISSION VIEJO Occupation RANCHER / DEVELOPER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 07 / 2010  
Transaction ID: SA11.35521  
Amount of Each Receipt this Period 2500.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3500.00

**TOTAL** This Period (last page this line number only) ..... ▶

10020754530

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 288 / 582
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MELINDA MOISO**

Mailing Address **P.O. BOX 9**

City **SAN JUAN CAPISTRAN** State **CA** Zip Code **92693-0009**

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 ▼ **2500.00**

Date of Receipt **09 / 07 / 2010**

Transaction ID: **SA11.35512**

Amount of Each Receipt this Period **2500.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. TODD MOLZ**

Mailing Address **777 S. OAKKNOLL AVENUE**

City **PASADENA** State **CA** Zip Code **91106-4462**

FEC ID number of contributing federal political committee. **C**

Name of Employer **OAKTREE CAPITAL MANAGEMENT** Occupation **ATTORNEY**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 15 / 2010**

Transaction ID: **SA11.40483**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. RONALD E. MONROE**

Mailing Address **1925 W. LINCOLN ROAD**

City **STOCKTON** State **CA** Zip Code **95207-2462**

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 ▼ **250.00**

Date of Receipt **09 / 20 / 2010**

Transaction ID: **SA11.43597**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3750.00**

**TOTAL** This Period (last page this line number only) ..... ▶

11  
10  
09  
08  
07  
06  
05  
04  
03  
02  
01

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 289 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH E. MONTEGGIA**

Mailing Address **P.O. BOX 6  
9531 MAIN STREET**

City **COELLO** State **IL** Zip Code **62825-0006**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **09 / 27 / 2010**  
Transaction ID: SA11.49126  
Amount of Each Receipt this Period **400.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. PARKER G. MONTGOMERY**

Mailing Address **699 RANCHO ALISAL DRIVE**

City **SOLVANG** State **CA** Zip Code **93463-3017**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **VENTURE CAPITAL**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **10000.00**

Date of Receipt **08 / 30 / 2010**  
Transaction ID: SA11.29655  
Amount of Each Receipt this Period **10000.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT D. MOORE**

Mailing Address **65720 BARKCOMP PARK ROAD**

City **BELMONT** State **OH** Zip Code **43718-9548**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KEN AMERICAN RESOURCES IN-C.** Occupation **MINING**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt **09 / 29 / 2010**  
Transaction ID: SA11.50675  
Amount of Each Receipt this Period **800.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... **11200.00**

**TOTAL** This Period (last page this line number only) .....

10020734832

**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 290 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. BLAKE E. MORGAN

Mailing Address P.O. BOX 9696

City State Zip Code  
RANCHO SANTA FE CA 92067-4696

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
ALEGRIA REAL ESTATE REAL ESTATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50866

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. JEFFREY MORGAN

Mailing Address 750 MEADOWOOD COURT

City State Zip Code  
WOODLAND CA 95695-3640

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
BLACK PINE HOLDINGS INC. C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 25 / 2010

Transaction ID: SA11.28222

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MRS. JUDY L. MORGAN

Mailing Address 6671 OWENS DRIVE

City State Zip Code  
PLEASANTON CA 94588-3335

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 ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50723

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 7900.00

**TOTAL** This Period (last page this line number only) ..... ▶

1103020713415

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 291 / 582

(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS. KELLIE MORGAN**

Mailing Address **750 MEADOWOOD COURT**

City State Zip Code  
**WOODLAND CA 95695-3640**

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 ▼  
**5000.00**

Date of Receipt

**08 / 25 / 2010**

Transaction ID: SA11.28220

Amount of Each Receipt this Period

**5000.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MR. KILE MORGAN, JR.**

Mailing Address **6671 OWENS DRIVE**

City State Zip Code  
**PLEASANTON CA 94588-3335**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**PONDEROSA HOMES II INC. CHAIRMAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt

**09 / 29 / 2010**

Transaction ID: SA11.50731

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MR. MARK JAMES MORGAN**

Mailing Address **601 CAMINO DEL CIELO**

City State Zip Code  
**NEWBURY PARK CA 91320-6734**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**ANTHEM BLUE CROSS VICE PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt

**09 / 08 / 2010**

Transaction ID: SA11.36428

Amount of Each Receipt this Period

**1000.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) .....

**6500.00**

TOTAL This Period (last page this line number only) .....

10020734654

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 292 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. RICHARD MORGANSTERN**

Mailing Address **2334 CANYONBACK ROAD**

City **LOS ANGELES** State **CA** Zip Code **90049-6811**

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 ▼ **1000.00**

Date of Receipt **09 / 30 / 2010**  
Transaction ID: **SA11.58962**  
Amount of Each Receipt this Period **1000.00**  
**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MR. RYAN MORGAN**

Mailing Address **P.O. BOX 9696**

City **RANCHO SANTA FE** State **CA** Zip Code **92067-4696**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ALEGRIA REAL ESTATE** Occupation **REAL ESTATE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **09 / 29 / 2010**  
Transaction ID: **SA11.50847**  
Amount of Each Receipt this Period **2400.00**  
**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**MR. KEVIN K. MORIARTY**

Mailing Address **22431 ANTONIO PKWY. #B160-602**

City **RANCHO SANTA MARGA** State **CA** Zip Code **92688-2804**

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 ▼ **10000.00**

Date of Receipt **09 / 10 / 2010**  
Transaction ID: **SA11.38929**  
Amount of Each Receipt this Period **10000.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **13400.00**

**TOTAL** This Period (last page this line number only) ..... **13400.00**

10020734655



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 293 / 582

(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)

CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DARYL MORRISON

Mailing Address 707 N. GEO WASHINGTON

City

YUBA CITY

State

CA

Zip Code

95993-9065

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 ▼

500.00

Date of Receipt

MM / DD / YYYY  
09 / 27 / 2010

Transaction ID: SA11.49274

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DONALD MUDD

Mailing Address 131 OCEAN GRANDE BLVD.  
CONDO 504

City

JUPITER

State

FL

Zip Code

33477-7352

FEC ID number of contributing federal political committee.

C

Name of Employer  
MUDD-LYMAN SALES

Occupation  
PRESIDENT

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50732

Amount of Each Receipt this Period

1200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JUDY T. MUDD

Mailing Address 131 OCEAN GRANDE BLVD.  
CONDO 504

City

JUPITER

State

FL

Zip Code

33477-7352

FEC ID number of contributing federal political committee.

C

Name of Employer  
BEST FACES OF CHICAGO

Occupation  
OWNER

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50727

Amount of Each Receipt this Period

1200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) .....

2900.00

TOTAL This Period (last page this line number only) .....

100207343

**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 294 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) <b>MRS. JUDITH V. MUELLER</b>	Date of Receipt MM / DD / YYYY <b>09 / 08 / 2010</b>
	Mailing Address <b>2000 AVENUE OF THE STARS</b>	Transaction ID: <b>SA11.36407</b>
	City State Zip Code <b>LOS ANGELES CA 90067-4700</b>	Amount of Each Receipt this Period <b>5000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b>		Occupation <b>HOMEMAKER</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>5000.00</b>

B.	Full Name (Last, First, Middle Initial) <b>MR. MICHAEL H. MUGEL</b>	Date of Receipt MM / DD / YYYY <b>09 / 21 / 2010</b>
	Mailing Address <b>2727 SHELL STREET</b>	Transaction ID: <b>SA11.44120</b>
	City State Zip Code <b>CORONA DEL MAR CA 92625-3253</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RED MOUNTAIN GROUP INC.</b>		Occupation <b>C.E.O.</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>2400.00</b>

C.	Full Name (Last, First, Middle Initial) <b>MR. JON MUNGER</b>	Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
	Mailing Address <b>10849 GLEDHILL ROAD</b>	Transaction ID: <b>SA11.49287</b>
	City State Zip Code <b>YUBA CITY CA 95991-9517</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>A &amp; G MONTANA PROPERTIES LP</b>		Occupation <b>CONTROLLER</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>7900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002074437

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 295 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MRS. BRENDA D. MURPHY  
Mailing Address 519 BLACKJACK OAK

City State Zip Code  
SHAVANO PARK TX 78230-5637

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 ▼  
2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2010

Transaction ID: SA11.35516

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MR. JOE MURPHY  
Mailing Address 519 BLACKJACK OAK

City State Zip Code  
SHAVANO PARK TX 78230-5637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
OP MURPHY TOMATO GROWER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
58400.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2010

Transaction ID: SA11.35520

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MR. JOE MURPHY  
Mailing Address 519 BLACKJACK OAK

City State Zip Code  
SHAVANO PARK TX 78230-5637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
OP MURPHY TOMATO GROWER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
58400.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2010

Transaction ID: SA11.40317

Amount of Each Receipt this Period  
56000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

60800.00

TOTAL This Period (last page this line number only) ▶

10020734633

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 296 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
KERRY J. MURPHY

Mailing Address 11 EL SERENO

City ORINDA State CA Zip Code 94563-1804

FEC ID number of contributing federal political committee. **C**

Name of Employer DUMOL Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 16 / 2010

Transaction ID: SA11.42687

Amount of Each Receipt this Period 1500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. ROBERT E. MURRAY, SR.

Mailing Address 29325 CHAGRIN BLVD  
SUITE 300

City PEPPER PIKE State OH Zip Code 44122-4600

FEC ID number of contributing federal political committee. **C**

Name of Employer MURRAY ENERGY CORPORATION Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3433.60

Date of Receipt 09 / 29 / 2010

Transaction ID: SA11.50679

Amount of Each Receipt this Period 3433.60

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MRS. BETH A. MYERS

Mailing Address 5447 QUAIL WAY

City CARMEL State CA Zip Code 93923-7965

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 ▼ 1200.00

Date of Receipt 09 / 02 / 2010

Transaction ID: SA11.33525

Amount of Each Receipt this Period 1200.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 6133.60

**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 297 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. STEVE H. NASH</b>	Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
Mailing Address <b>4225 E. CONEJO AVENUE</b>	Transaction ID: <b>SA11.38683</b>
City <b>SELMA</b> State <b>CA</b> Zip Code <b>93662-9658</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>MASH FARMS</b> Occupation <b>DAIRYMAN</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. FRED NEFF</b>	Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
Mailing Address <b>2136 ARROYO DRIVE</b>	Transaction ID: <b>SA11.58970</b>
City <b>RIVERSIDE</b> State <b>CA</b> Zip Code <b>92506-1500</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>KADENA PACIFIC</b> Occupation <b>PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. DAVID A. NELSON</b>	Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>4351 SPRING FOREST LANE</b>	Transaction ID: <b>SA11.39401</b>
City <b>WESTLAKE VILLAGE</b> State <b>CA</b> Zip Code <b>91362-5605</b>	Amount of Each Receipt this Period <b>5000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>WARNER PACIFIC INSURANCE</b> Occupation <b>INSURANCE</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>5000.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>7900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073400

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 298 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DENNIS C. NELSON**

Mailing Address **950 THARP ROAD  
SUITE 501**

City **YUBA CITY** State **CA** Zip Code **95993-8347**

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 ▼ **1000.00**

Date of Receipt **09 / 10 / 2010**  
Transaction ID: **SA11.38967**  
Amount of Each Receipt this Period **1000.00**  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**FRANCES NELSON**

Mailing Address **3304 PINE AVENUE**

City **MANHATTAN BEACH** State **CA** Zip Code **90266-3618**

FEC ID number of contributing federal political committee. **C**

Name of Employer **OAKTREE CAPITAL MANAGEMENT** Occupation **FINANCIAL ANALYST**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 08 / 2010**  
Transaction ID: **SA11.36438**  
Amount of Each Receipt this Period **1000.00**  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MS. FRANCES B. NELSON**

Mailing Address **60 31ST AVENUE**

City **SAN MATEO** State **CA** Zip Code **94403-3404**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BOHANNON DEVELOPING COMPAN-  
NY** Occupation **EXECUTIVE**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3000.00**

Date of Receipt **09 / 15 / 2010**  
Transaction ID: **SA11.40309**  
Amount of Each Receipt this Period **2000.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **4000.00**

**TOTAL** This Period (last page this line number only) ..... ▶

1002074601

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 299 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) MS. FRANCES B. NELSON	Date of Receipt MM / DD / YYYY 09 / 21 / 2010
	Mailing Address 60 31ST AVENUE	Transaction ID: SA11.44112
	City State Zip Code SAN MATEO CA 94403-3404	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer BOHANNON DEVELOPING COMPAN NY	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	
<b>B.</b>	Full Name (Last, First, Middle Initial) MS. JENNIFER NELSON	Date of Receipt MM / DD / YYYY 09 / 23 / 2010
	Mailing Address 1450 RANCHO VIEW DRIVE	Transaction ID: SA11.47347
	City State Zip Code LAFAYETTE CA 94549-2230	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer SELF-EMPLOYED	Occupation PUBLIC RELATIONS/WRITER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>C.</b>	Full Name (Last, First, Middle Initial) MR. JOHN H. NELSON	Date of Receipt MM / DD / YYYY 09 / 13 / 2010
	Mailing Address 1505 OUTLOOK CIRCLE	Transaction ID: SA11.39402
	City State Zip Code WESTLAKE VILLAGE CA 91362-4252	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer WARNER PACIFIC INSURANCE	Occupation INSURANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		6500.00
<b>TOTAL</b> This Period (last page this line number only) .....		

10020734002

**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 300 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. JOHN J. NELSON</b>	Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>4932 SUMMIT VIEW DRIVE</b>	Transaction ID: <b>SA11.39383</b>
City <b>WESTLAKE VILLAGE</b> State <b>CA</b> Zip Code <b>91362-5610</b>	Amount of Each Receipt this Period <b>5000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>WARNER PACIFIC INSURANCE</b> Occupation <b>CEO</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>25000.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. JOHN J. NELSON</b>	Date of Receipt MM / DD / YYYY <b>09 / 15 / 2010</b>
Mailing Address <b>4932 SUMMIT VIEW DRIVE</b>	Transaction ID: <b>SA11.40310</b>
City <b>WESTLAKE VILLAGE</b> State <b>CA</b> Zip Code <b>91362-5610</b>	Amount of Each Receipt this Period <b>20000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>WARNER PACIFIC INSURANCE</b> Occupation <b>CEO</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>25000.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. MARK D. NELSON</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>239 WHITBY ROAD</b>	Transaction ID: <b>SA11.50680</b>
City <b>COAL CITY</b> State <b>WV</b> Zip Code <b>25823-9619</b>	Amount of Each Receipt this Period <b>350.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>KEN AMERICAN RESOURCES</b> Occupation <b>PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>350.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>25350.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002071465



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 301 / 582

(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)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RICHARD NELSON	Date of Receipt MM / DD / YYYY 09 / 16 / 2010
	Mailing Address 2787 PLEASANT GROVE ROAD	Transaction ID: SA11.42717
	City State Zip Code PLEASANT GROVE CA 95668-9732	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RICE FARMER		Occupation FINANCIAL ADVISOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00
B.	Full Name (Last, First, Middle Initial) MR. SAM NEVIS	Date of Receipt MM / DD / YYYY 09 / 16 / 2010
	Mailing Address P.O. BOX 3775	Transaction ID: SA11.42682
	City State Zip Code YUBA CITY CA 95992-3775	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED		Occupation FARMER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00
C.	Full Name (Last, First, Middle Initial) MRS. PAMELA M. NICHOLSON	Date of Receipt MM / DD / YYYY 09 / 02 / 2010
	Mailing Address 29 BRENTMOOR PARK	Transaction ID: SA11.33497
	City State Zip Code SAINT LOUIS MO 63105-3070	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer COMMUNITY VOLUNTEER		Occupation COMMUNITY VOLUNTEER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2400.00
SUBTOTAL of Receipts This Page (optional) .....		3650.00
TOTAL This Period (last page this line number only) .....		

100207346

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 302 / 582
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. JOHN D. NICOLETTI</b>	Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>
Mailing Address <b>1915 BOULTON WAY</b>	Transaction ID: <b>SA11.42718</b>
City <b>MARYSVILLE</b> State <b>CA</b> Zip Code <b>95901-3813</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>NICOLETTI OIL COMPANY</b> Occupation <b>SUPERVISOR</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. KENNETH G. NOBLE</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>16312 WILDFIRE CIRCLE</b>	Transaction ID: <b>SA11.50871</b>
City <b>HUNTINGTON BEACH</b> State <b>CA</b> Zip Code <b>92649-2539</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>NOBLE DISTRIBUTION</b> Occupation <b>EXECUTIVE</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. SANDRA NOBLE</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>16312 WILDFIRE CIRCLE</b>	Transaction ID: <b>SA11.50859</b>
City <b>HUNTINGTON BEACH</b> State <b>CA</b> Zip Code <b>92649-2539</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>NOBLE DISTRIBUTION</b> Occupation <b>C.P.A.</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734854

**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 303 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. HENRY L. NORDHOFF**

Mailing Address **251 OCEAN VIEW AVENUE**

City **DEL MAR** State **CA** Zip Code **92014-3321**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GEN-PROBE** Occupation **CHAIRMAN OF THE BOARD**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4800.00**

Date of Receipt **09 / 15 / 2010**

Transaction ID: **SA11.40335**

Amount of Each Receipt this Period **4800.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. R. DONALD NORENE**

Mailing Address **600 SWANSON ROAD**

City **RIO OSO** State **CA** Zip Code **95674-9621**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NORENE RANCHES INC.** Occupation **FARMER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **08 / 26 / 2010**

Transaction ID: **SA11.29468**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. DAVID A. NORMAN**

Mailing Address **106 ALTURA VISTA**

City **LAS GATOS** State **CA** Zip Code **95032-1157**

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 ▼ **500.00**

Date of Receipt **09 / 15 / 2010**

Transaction ID: **SA11.40346**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **5800.00**

**TOTAL** This Period (last page this line number only) .....

1002073435

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 304 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MRS. MAMIE R. NORMAN

Mailing Address 106 ALTURA VISTA

City LAS GATOS State CA Zip Code 95032-1157

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 ▼ 500.00

Date of Receipt 09 / 15 / 2010  
Transaction ID: SA11.40330  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. JEFFREY S. NORTON

Mailing Address P.O. BOX 336

City ROBBINS State CA Zip Code 95676-0336

FEC ID number of contributing federal political committee. **C**

Name of Employer DEMETER CORPORATION Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2010  
Transaction ID: SA11.29747  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. BRIAN T. NUGENT

Mailing Address 9543 LA JOLLA SHORES DRIVE

City LA JOLLA State CA Zip Code 92037-1139

FEC ID number of contributing federal political committee. **C**

Name of Employer ST. BERNARD SOFTWARE Occupation SOFTWARE EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2010  
Transaction ID: SA11.44124  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1250.00

TOTAL This Period (last page this line number only) ..... ▶

10020734557

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 305 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MR. TOM P. NUNES, JR.

Mailing Address 13775 VISTA DORADA

City State Zip Code  
SALINAS CA 93908-9318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
THE NUNES COMPANY, INC. PRODUCE GROWER/SHIPPER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50724

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MRS. FAYE J. O' NEIL

Mailing Address 873 WOOD ACRES ROAD

City State Zip Code  
SANTA MONICA CA 90402-2107

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 ▼  
10000.00

Date of Receipt

MM / DD / YYYY  
09 / 27 / 2010

Transaction ID: SA11.49825

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MR. WILLIAM J. O' NEIL

Mailing Address 873 WOOD ACRES ROAD

City State Zip Code  
SANTA MONICA CA 90402-2107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INVESTORS BUSINESS DAILY CHAIRMAN & FOUNDER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt

MM / DD / YYYY  
09 / 27 / 2010

Transaction ID: SA11.49826

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) .....

21000.00

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 306 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MR. ROBERT C. O'BRIEN		Date of Receipt MM / DD / YYYY 09 / 22 / 2010
Mailing Address 555 W. FIFTH STREET 48TH FLOOR		Transaction ID: SA11.45235
City LOS ANGELES	State CA	Zip Code 90013-1065
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer ARENT FOX, LLP	Occupation ATTORNEY	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) MR. JOHN D. O'CONNOR		Date of Receipt MM / DD / YYYY 09 / 10 / 2010
Mailing Address 287 MAKIN GRADE		Transaction ID: SA11.38974
City KENTFIELD	State CA	Zip Code 94904-1027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF-EMPLOYED	Occupation ATTORNEY	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) MR. JOHN T. O'CONNELL		Date of Receipt MM / DD / YYYY 09 / 02 / 2010
Mailing Address 524 FOX RIDGE ROAD		Transaction ID: SA11.33503
City SAINT LOUIS	State MO	Zip Code 63131-3402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
Name of Employer CENTRIC GROUP	Occupation VICE CHAIRMAN/C.F.O.	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional) .....	3900.00
TOTAL This Period (last page this line number only) .....	

10020714150

**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 307 / 582
<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. STEPHANIE OANA

Mailing Address 6257 ACACIA AVENUE

City OAKLAND State CA Zip Code 94618-1851

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation STUDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2010  
Transaction ID: SA11.27729  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MRS. CHRISTINE OBERTI

Mailing Address 8116 N. PREUSS

City CLOVIS State CA Zip Code 93619-9160

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation REAL ESTATE BROKER & FARMING INTERESTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2010  
Transaction ID: SA11.29726  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
DR. JACK M. OBERTI

Mailing Address 8116 N. PREUSS

City CLOVIS State CA Zip Code 93619-9160

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation DENTIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2010  
Transaction ID: SA11.29759  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1500.00

TOTAL This Period (last page this line number only) ..... ▶

10020734670

**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 308 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MRS. DIANE OJI	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
Mailing Address 1712 REGENCY WAY	Transaction ID: SA11.38725
City YUBA CITY State CA Zip Code 95993-5177	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer SELF-EMPLOYED Occupation FARMING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

**B.**

Full Name (Last, First, Middle Initial) MR. JOHN I. OJI	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
Mailing Address 1712 REGENCY WAY	Transaction ID: SA11.38748
City YUBA CITY State CA Zip Code 95993-5177	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer SELF-EMPLOYED Occupation FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

**C.**

Full Name (Last, First, Middle Initial) MRS. DOROTHY OKEN	Date of Receipt MM / DD / YYYY 09 / 27 / 2010
Mailing Address 2274 DAWSON COVE	Transaction ID: SA11.49282
City CLOVIS State CA Zip Code 93611-5995	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer WONDER VALLEY RESORT Occupation SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional) .....	1000.00
TOTAL This Period (last page this line number only) .....	

10020734671



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 309 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. STAN OKEN**

Mailing Address **2274 DAWSON COVE**

City **CLOVIS** State **CA** Zip Code **93611-5995**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WONDER VALLEY RANCH** Occupation **OWNER**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 27 / 2010**

Transaction ID: **SA11.49276**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. GREG ONKEN**

Mailing Address **193 HILLCREST ROAD**

City **BERKELEY** State **CA** Zip Code **94705-2808**

FEC ID number of contributing federal political committee. **C**

Name of Employer **J.P. MORGAN** Occupation **FINANCE**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 10 / 2010**

Transaction ID: **SA11.38973**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT ORR**

Mailing Address **510 N. WALNUT STREET**

City **WEST FRANKFORT** State **IL** Zip Code **62896-1707**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FREEDOM MATERIAL RESOURCE** Occupation **BUSINESS EXECUTIVE**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50682**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2000.00**

**TOTAL** This Period (last page this line number only) ..... ▶

10020734672

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 310 / 582  
(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. LEA ORWITZ Mailing Address 20 BUCKTHORN WAY City Hillsborough State CA Zip Code 94010-6524 FEC ID number of contributing federal political committee. C	Date of Receipt MM / DD / YYYY 08 / 26 / 2010 Transaction ID: SA11.29478 Amount of Each Receipt this Period 250.00 CONTRIBUTION	
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 250.00	
	<b>B.</b> Full Name (Last, First, Middle Initial) MR. JOSEPH AMIL OSHA Mailing Address 6257 ACACIA AVENUE City Oakland State CA Zip Code 94618-1851 FEC ID number of contributing federal political committee. C	Date of Receipt MM / DD / YYYY 08 / 23 / 2010 Transaction ID: SA11.27731 Amount of Each Receipt this Period 500.00 CONTRIBUTION
	Name of Employer BANK OF AMERICA Occupation MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MR. SEAN OVERSMITH Mailing Address 13088 SUNSET POINT PLACE City San Diego State CA Zip Code 92130-1366 FEC ID number of contributing federal political committee. C	Date of Receipt MM / DD / YYYY 09 / 30 / 2010 Transaction ID: SA11.58913 Amount of Each Receipt this Period 2400.00 CONTRIBUTION	
Name of Employer SELF-EMPLOYED Occupation YACHT MANAGEMENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 2400.00		
SUBTOTAL of Receipts This Page (optional) ..... ▶ 3150.00		
TOTAL This Period (last page this line number only) ..... ▶		

10020734673

**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 311 / 582
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
KIM A. OVIATT

Mailing Address 1020 E. MINERAL KING AVENUE

City VISALIA State CA Zip Code 93292-6916

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 19 / 2010

Transaction ID: SA11.27681

Amount of Each Receipt this Period 10000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. GEOFF PALMER

Mailing Address 11740 SAN VICENTE BLVD. #208

City LOS ANGELES State CA Zip Code 90049-6610

FEC ID number of contributing federal political committee. **C**

Name of Employer G.H. PALMER ASSOCIATES Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 24 / 2010

Transaction ID: SA11.28200

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MS. GRACE GEORGE PANCAKE

Mailing Address P.O. BOX 2767

City STAUNTON State VA Zip Code 24402-2767

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2010

Transaction ID: SA11.58942

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 12000.00

TOTAL This Period (last page this line number only) ..... ▶

1002073467A

**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 312 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. MATT PANDOL, JR.

Mailing Address 32540 PETERSON ROAD

City DELANO State CA Zip Code 93215-9368

FEC ID number of contributing federal political committee. **C**

Name of Employer PANDOL BROTHERS INC Occupation FARM MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 09 / 2010

Transaction ID: SA11.38682

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MRS. MONA PANKEY

Mailing Address 4800 LEGRAY ROAD

City ARVIN State CA Zip Code 93203-9773

FEC ID number of contributing federal political committee. **C**

Name of Employer KEY COLD STORAGE Occupation FARMER/COLD STORAGE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 31 / 2010

Transaction ID: SA11.29746

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
LOREN PANNIER

Mailing Address 40 BELCOURT DRIVE

City NEWPORT BEACH State CA Zip Code 92660-4213

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 ▼ 250.00

Date of Receipt 09 / 02 / 2010

Transaction ID: SA11.33471

Amount of Each Receipt this Period 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 6250.00

TOTAL This Period (last page this line number only) ..... ▶

10020734673

**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 313 / 582
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. JAMES A. PARDINI

Mailing Address 2257 W. SHAW AVENUE

City FRESNO State CA Zip Code 93711-3408

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation RESTAURANT OWNER/CATERER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 03 / 2010

Transaction ID: SA11.33575

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. DENNIS PARNAGIAN

Mailing Address 8570 S. CEDAR AVENUE

City FRESNO State CA Zip Code 93725-8905

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 ▼ 1000.00

Date of Receipt 09 / 03 / 2010

Transaction ID: SA11.33574

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. KIRK PARRISH

Mailing Address 8080 N. PALM SUITE 210

City FRESNO State CA Zip Code 93711-5797

FEC ID number of contributing federal political committee. **C**

Name of Employer FAMOUS SOFTWARE LLC Occupation SOFTWARE COMPANY OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 24 / 2010

Transaction ID: SA11.48294

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2500.00

TOTAL This Period (last page this line number only) ..... ▶

10020714375

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 314 / 582  
(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. GERALD L. PARSKY Mailing Address 10877 WILSHIRE BLVD. #2100 City State Zip Code LOS ANGELES CA 90024-4378 FEC ID number of contributing federal political committee. C	Date of Receipt MM / DD / YYYY 09 / 22 / 2010 Transaction ID: SA11.45232 Amount of Each Receipt this Period 4800.00 CONTRIBUTION	
	Name of Employer Occupation AURORA MANAGEMENT PARTNERS CHAIRMAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 4800.00	
	<b>B.</b> Full Name (Last, First, Middle Initial) MRS. ROBIN C. PARSKY Mailing Address 10877 WILSHIRE BLVD. #2100 City State Zip Code LOS ANGELES CA 90024-4378 FEC ID number of contributing federal political committee. C	Date of Receipt MM / DD / YYYY 09 / 22 / 2010 Transaction ID: SA11.45216 Amount of Each Receipt this Period 4800.00 CONTRIBUTION
	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 4800.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MS. SARAH L. PASCOE Mailing Address 4615 CAMDEN DRIVE City State Zip Code CORONA DEL MAR CA 92625-3104 FEC ID number of contributing federal political committee. C	Date of Receipt MM / DD / YYYY 09 / 13 / 2010 Transaction ID: SA11.39412 Amount of Each Receipt this Period 500.00 CONTRIBUTION	
Name of Employer Occupation SELF-EMPLOYED SELF-EMPLOYED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 500.00		
SUBTOTAL of Receipts This Page (optional) ..... ▶ 10100.00		
TOTAL This Period (last page this line number only) ..... ▶		

10020734677

**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 315 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD PASLAY**

Mailing Address **P.O. BOX 718**

City **MADERA** State **CA** Zip Code **93639-0718**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AGRI WORLD COOPERATIVE** Occupation **GENERAL MANAGER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **08 / 26 / 2010**

Transaction ID: **SA11.29463**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM P. PASSP**

Mailing Address **33 BURNING TREE ROAD**

City **NEWPORT BEACH** State **CA** Zip Code **92660-5107**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PASSCO COMPANIES** Occupation **CHAIRMAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt **09 / 16 / 2010**

Transaction ID: **SA11.42745**

Amount of Each Receipt this Period **2000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**PINAKIN PATEL**

Mailing Address **1600 W. HILLSIDE BLVD.**

City **SAN MATEO** State **CA** Zip Code **94402**

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 ▼ **2400.00**

Date of Receipt **09 / 02 / 2010**

Transaction ID: **SA11.33478**

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **5400.00**

**TOTAL** This Period (last page this line number only) .....

1302073457

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 316 / 582
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>RENUKA PATEL</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
Mailing Address <b>1600 W. HILLSIDE BLVD.</b>	Transaction ID: SA11.33479
City <b>SAN MATEO</b> State <b>CA</b> Zip Code <b>94402</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>LISI</b> Occupation <b>PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. DAVID PATTERSON</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
Mailing Address <b>5225 ZAKON ROAD</b>	Transaction ID: SA11.33475
City <b>TORRANCE</b> State <b>CA</b> Zip Code <b>90505-4351</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>METRIC PRECISION</b> Occupation <b>CEO</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MRS. JULIANNE PATTERSON</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
Mailing Address <b>5225 ZAKON ROAD</b>	Transaction ID: SA11.33470
City <b>TORRANCE</b> State <b>CA</b> Zip Code <b>90505-4351</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>USMP</b> Occupation <b>COMPTRROLLER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>7200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734573



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 317 / 582  
(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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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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MS. DONNA B. PAUL		Date of Receipt MM / DD / YYYY 09 / 27 / 2010	
Mailing Address P.O. BOX 576 330 N. 7TH STREET		Transaction ID: SA11.49351	
City STEUBENVILLE	State OH	Zip Code 43952-5576	Amount of Each Receipt this Period 2400.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer HOMEMAKER	Occupation HOMEMAKER	Aggregate Year-to-Date 2400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) MR. ROY V. PAULSON		Date of Receipt MM / DD / YYYY 09 / 15 / 2010	
Mailing Address 35645 CORNFLOWER PLACE		Transaction ID: SA11.40334	
City MURRIETA	State CA	Zip Code 92562-4590	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer PAULSONS MANUFACTURING	Occupation PRESIDENT	Aggregate Year-to-Date 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) MR. WILLIAM R. PAYDEN		Date of Receipt MM / DD / YYYY 09 / 29 / 2010	
Mailing Address 11 SEA COLONY DRIVE		Transaction ID: SA11.50737	
City SANTA MONICA	State CA	Zip Code 90405-5338	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer THE REYNOLDS COMPANY	Occupation FINANCIAL P.R. CONSULTANTS	Aggregate Year-to-Date 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) .....	5900.00
TOTAL This Period (last page this line number only) .....	

100207346

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 318 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MS. ASHLEY PAYNE

Mailing Address 201 W. MONTE VISTA CIRCLE

City State Zip Code  
WOODLAND CA 95695-5248

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
SELF-EMPLOYED RANCHER

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 250.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2010

Transaction ID: SA11.38680

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
DR. JAMES PAYNE

Mailing Address 1334 NELSON AVENUE L.

City State Zip Code  
MODESTO CA 95350-5341

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
SELF PHYSICIAN

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 17 / 2010

Transaction ID: SA11.43497

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
ONOFRIO F. PECORARO

Mailing Address 1726 INDIA STREET

City State Zip Code  
SAN DIEGO CA 92101-2518

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
SELF-EMPLOYED PAINTING CONTRACTOR

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 16200.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

Transaction ID: SA11.47344

Amount of Each Receipt this Period  
16200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) .....

17450.00

TOTAL This Period (last page this line number only) .....

10020734531

**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 319 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) MR. DONALD PERACCHI	Date of Receipt MM / DD / YYYY 08 / 31 / 2010
	Mailing Address 4283 N. VAN NESS BLVD.	Transaction ID: SA11.29745
	City FRESNO State CA Zip Code 93704-3721	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation AGRICULTURE	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00

B.	Full Name (Last, First, Middle Initial) MR. ROBERT THOMAS PERICHT	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 206 BROOKING LANE	Transaction ID: SA11.58980
	City PEACHTREE CITY State GA Zip Code 30269-6647	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SADDLE CREEK CORPORATION Occupation SENIOR VICE PRESIDENT	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

C.	Full Name (Last, First, Middle Initial) MRS. SUSAN M. PERICHT	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 206 BROOKING LANE	Transaction ID: SA11.58964
	City PEACHTREE CITY State GA Zip Code 30269-6647	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional) .....	3400.00
TOTAL This Period (last page this line number only) .....	

10020734882

**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 320 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS J. PERKINS**

Mailing Address **4 EMBARCADERO CTR  
STE 3620**

City **SAN FRANCISCO** State **CA** Zip Code **94111-4155**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KLEINER PERKINS** Occupation **INVESTOR**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **30400.00**

Date of Receipt **MM / DD / YYYY**  
**07 / 30 / 2010**

Transaction ID: **SA11.26324**

Amount of Each Receipt this Period **4500.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. DONALD PERLMAN**

Mailing Address **3900 5TH AVENUE  
SUITE 350**

City **SAN DIEGO** State **CA** Zip Code **92103-3171**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MONRO CAPITAL** Occupation **OWNER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **MM / DD / YYYY**  
**09 / 13 / 2010**

Transaction ID: **SA11.39366**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH A. PERRICONE**

Mailing Address **18 OLD COURSE DRIVE**

City **NEWPORT BEACH** State **CA** Zip Code **92660-4276**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PERRICONE INVESTMENTS** Occupation **PRESIDENT**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **MM / DD / YYYY**  
**08 / 31 / 2010**

Transaction ID: **SA11.29715**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5500.00**

**TOTAL** This Period (last page this line number only) ..... ▶

10020734633

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 321 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. CYNTHIA PESTER		Date of Receipt MM / DD / YYYY 09 / 24 / 2010	
Mailing Address 406 PONDEROSA COURT		Transaction ID: SA11.48325	
City LAFAYETTE	State CA	Zip Code 94549-1813	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	
<b>B.</b> Full Name (Last, First, Middle Initial) MR. ROBERT E. PESTER		Date of Receipt MM / DD / YYYY 09 / 24 / 2010	
Mailing Address 406 PONDEROSA COURT		Transaction ID: SA11.48347	
City LAFAYETTE	State CA	Zip Code 94549-1813	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer BOSTON PROPERTIES INC		Occupation SVP & REGIONAL MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MS. JILL PETERSON BURNS		Date of Receipt MM / DD / YYYY 08 / 26 / 2010	
Mailing Address 438 EL ARROYO ROAD		Transaction ID: SA11.29408	
City HILLSBOROUGH	State CA	Zip Code 94010-6669	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer SELF-EMPLOYED		Occupation MARKETING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .....		1250.00	
TOTAL This Period (last page this line number only) .....		_____	

130207445

**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 322 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT PETERS**

Mailing Address **1282 SAINT MARK CT.**

City **LOS ALTOS** State **CA** Zip Code **94024-7041**

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 ▼ **250.00**

Date of Receipt **09 / 07 / 2010**

Transaction ID: **SA11.35519**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. JAMES O. PETTY, JR.**

Mailing Address **P.O. BOX 701**

City **RIVERDALE** State **CA** Zip Code **93656-0701**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HAMLIN INSURANCE AGENCY** Occupation **INSURANCE BROKER/AGENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 01 / 2010**

Transaction ID: **SA11.30370**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. TRACY M. PEZZINI**

Mailing Address **965 OLD STAGE ROAD**

City **SALINAS** State **CA** Zip Code **93908-9799**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 02 / 2010**

Transaction ID: **SA11.33466**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1500.00**

**TOTAL** This Period (last page this line number only) ..... ▶

11  
10  
09  
08  
07  
06  
05  
04  
03  
02  
01

**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 323 / 582
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) MR. JOHN B. PHILLIPS	Date of Receipt MM / DD / YYYY 09 / 29 / 2010
	Mailing Address 175 HAWKEN ROAD	Transaction ID: SA11.50750
	City RENO State NV Zip Code 89519-8039	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer PETERBILT TRUCK PARTS & EQUIPMENT, L.L.C. Occupation PRESIDENT	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date 2000.00

B.	Full Name (Last, First, Middle Initial) MR. WILLIAM D. PHILLIMORE	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 7812 LOVETTA DRIVE	Transaction ID: SA11.38723
	City BAKERSFIELD State CA Zip Code 93308-5316	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation VICE PRESIDENT	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date 500.00

C.	Full Name (Last, First, Middle Initial) MRS. PATTI PIASECKI	Date of Receipt MM / DD / YYYY 09 / 27 / 2010
	Mailing Address 67341 EBBERT SOUTH ROAD	Transaction ID: SA11.49356
	City ST. CLAIRSVILLE State OH Zip Code 43950-9376	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer OHIO AMERICAN ENERGY INC Occupation DIRECTOR	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date 300.00

SUBTOTAL of Receipts This Page (optional) .....	2800.00
TOTAL This Period (last page this line number only) .....	

10020714433

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 324 / 582

(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

**RENEE PINEL**

Mailing Address **1809 SANTA FE DRIVE**

City State Zip Code  
**STOCKTON CA 95209-1345**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**WESTERN PLANT HEALTH ASSOCIATION PRESIDENT/CEO**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2500.00**

Date of Receipt

**09 / 27 / 2010**

Transaction ID: SA11.49277

Amount of Each Receipt this Period

**2500.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)

**MRS. CYNTHIA PINSON**

Mailing Address **1001 SUNGRO WAY**

City State Zip Code  
**BAKERSFIELD CA 93311-3536**

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 ▼  
**250.00**

Date of Receipt

**09 / 09 / 2010**

Transaction ID: SA11.38722

Amount of Each Receipt this Period

**250.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)

**MR. HARLEY F. PINSON**

Mailing Address **1001 SUNGRO WAY**

City State Zip Code  
**BAKERSFIELD CA 93311-3536**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**SELF-EMPLOYED ATTORNEY**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**09 / 09 / 2010**

Transaction ID: SA11.38747

Amount of Each Receipt this Period

**250.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ▶

**3000.00**

**TOTAL** This Period (last page this line number only) ▶

10020714637



**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 325 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MS. SARA C. PIPES

Mailing Address 730 HUNTINGTON CIRCLE

City PASADENA State CA Zip Code 91106-4510

FEC ID number of contributing federal political committee. **C**

Name of Employer PACIFIC RESEARCH INSTITUTE Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2010

Transaction ID: SA11.39403

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. CHARLIE PITIGLIANO

Mailing Address P.O. BOX 9

City TIPTON State CA Zip Code 93272-0009

FEC ID number of contributing federal political committee. **C**

Name of Employer PITIGLIANO FARMS Occupation FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2010

Transaction ID: SA11.50758

Amount of Each Receipt this Period 250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MRS. NANCY PITIGLIANO

Mailing Address P.O. BOX 9

City TIPTON State CA Zip Code 93272-0009

FEC ID number of contributing federal political committee. **C**

Name of Employer PITIGLIANO FARMS Occupation FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2010

Transaction ID: SA11.50752

Amount of Each Receipt this Period 250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1000.00

**TOTAL** This Period (last page this line number only) ..... ▶

10020715

**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 326 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. LLOYD PLANK</b>	Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
Mailing Address <b>1400 EASTON DRIVE SUITE 107</b>	Transaction ID: <b>SA11.38707</b>
City <b>BAKERSFIELD</b>	State <b>CA</b>
Zip Code <b>93309-9403</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. RONALD PLOTKIN</b>	Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>
Mailing Address <b>4218 DAN WOOD DRIVE</b>	Transaction ID: <b>SA11.27661</b>
City <b>WESTLAKE VILLAGE</b>	State <b>CA</b>
Zip Code <b>91362-4705</b>	Amount of Each Receipt this Period <b>10000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>INVESTOR</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>10000.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. GREGORY D. POE</b>	Date of Receipt MM / DD / YYYY <b>09 / 21 / 2010</b>
Mailing Address <b>675 E. STREET NW #310</b>	Transaction ID: <b>SA11.44111</b>
City <b>WASHINGTON</b>	State <b>DC</b>
Zip Code <b>20004-2250</b>	Amount of Each Receipt this Period <b>4800.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>LOGOS TECHNOLOGIES, INC.</b>	Occupation <b>PRESIDENT &amp; C.E.O.</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>4800.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>15050.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 327 / 582
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. THOMAS J. POGGI

Mailing Address 30 ROSEDALE ROAD

City CALISTOGA State CA Zip Code 94515-1807

FEC ID number of contributing federal political committee. **C**

Name of Employer THE C.A.C. GROUP Occupation PRINCIPAL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 23 / 2010

Transaction ID: SA11.47365

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. DAVID POLAK

Mailing Address 1725 GREEN ACRES DRIVE

City BEVERLY HILLS State CA Zip Code 90210-2741

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 09 / 30 / 2010

Transaction ID: SA11.58738

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. LOUIS J. POLETTI

Mailing Address 333 EL CAMINO REAL

City S SAN FRANCISCO State CA Zip Code 94080-5923

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE BROKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 15 / 2010

Transaction ID: SA11.40311

Amount of Each Receipt this Period 2000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4000.00

**TOTAL** This Period (last page this line number only) ..... ▶

10020734600

**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 328 / 582
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. FRANK J. PONZIO, JR.

Mailing Address 219 SOUTH ST

City NEW PROVIDENCE State NJ Zip Code 07974-2100

FEC ID number of contributing federal political committee. **C**

Name of Employer SYMBOLIC Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 09 / 30 / 2010

Transaction ID: SA11.58944

Amount of Each Receipt this Period 15000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MS. DEBBIE POOCHIGIAN

Mailing Address P.O. BOX 8446

City FRESNO State CA Zip Code 93747-8446

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 ▼ 500.00

Date of Receipt 09 / 01 / 2010

Transaction ID: SA11.30282

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. GEORGE A. POOLE, JR.

Mailing Address 4105 SEGUNDA DRIVE

City CARMEL State CA Zip Code 93923-8812

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 ▼ 250.00

Date of Receipt 08 / 31 / 2010

Transaction ID: SA11.29754

Amount of Each Receipt this Period 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 15750.00

TOTAL This Period (last page this line number only) ..... ▶

100207349

**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 329 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**DR. BRUCE M. POPE**

Mailing Address **9900 LARKIN ROAD**

City **LIVE OAK** State **CA** Zip Code **95953-2442**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **DENTIST**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 09 / 2010**  
 Transaction ID: **SA11.38679**  
 Amount of Each Receipt this Period **250.00**  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**PATRICIA M. POPE**

Mailing Address **840 POWELL STREET**

City **SAN FRANCISCO** State **CA** Zip Code **94108-2006**

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 ▼ **300.00**

Date of Receipt **08 / 03 / 2010**  
 Transaction ID: **SA11.26300**  
 Amount of Each Receipt this Period **300.00**  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. NORM PORGES**

Mailing Address **P.O. BOX 3469**

City **MODESTO** State **CA** Zip Code **95353-3469**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PRIME SHINE INC.** Occupation **BUSINESS OWNER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 27 / 2010**  
 Transaction ID: **SA11.49288**  
 Amount of Each Receipt this Period **500.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1050.00**

**TOTAL** This Period (last page this line number only) ..... ▶

10020734692

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 330 / 582

(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)

CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DAVID PHILIP PORRECA

Mailing Address 10444 SUMMERWOOD COURT

City State Zip Code  
SAN DIEGO CA 92131-2330

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
SCIENTIST

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36431

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. DONA PORRECA

Mailing Address 10444 SUMMERWOOD COURT

City State Zip Code  
SAN DIEGO CA 92131-2330

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 ▼

500.00

Date of Receipt

MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36424

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. DONNA PORTER

Mailing Address 215 LEWIS COURT

City State Zip Code  
CORONA CA 92882-1812

FEC ID number of contributing federal political committee.

C

Name of Employer  
COAST FRAMING INC.

Occupation  
CONTRACTOR

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

MM / DD / YYYY  
09 / 28 / 2010

Transaction ID: SA11.49822

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) .....

3400.00

TOTAL This Period (last page this line number only) .....

10020744503

**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 331 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. GREGORY SCOTT PORTER</b>		Date of Receipt MM / DD / YYYY <b>09 / 24 / 2010</b>
Mailing Address <b>155 108TH AVENUE NE #510</b>		Transaction ID: <b>SA11.48287</b>
City <b>BELLEVUE</b>	State <b>WA</b>	Zip Code <b>98004-5901</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>BERNISON PORTER &amp; COMPANY P.L.L.C.</b>		CONTRIBUTION
Occupation <b>C.P.A.</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. LAUREN RHUE PORTER</b>		Date of Receipt MM / DD / YYYY <b>09 / 24 / 2010</b>
Mailing Address <b>190 QUEEN ANNE AVENUE N. #110</b>		Transaction ID: <b>SA11.48281</b>
City <b>SEATTLE</b>	State <b>WA</b>	Zip Code <b>98109-4968</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>SEATTLE MORTGAGE</b>		CONTRIBUTION
Occupation <b>LOAN OFFICER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. THOMAS M. POTTER</b>		Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>1085 SHADY LANE ROAD</b>		Transaction ID: <b>SA11.50685</b>
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43227-1468</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>300.00</b>
Name of Employer <b>D.A. LUBRICANT</b>		CONTRIBUTION
Occupation <b>V.P. SALES</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>300.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734034

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 332 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. JAMES A. POULSON Mailing Address 709 W. MAIN #7 City State Zip Code MOUNT PLEASANT UT 84647-1367 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer UTAH AMERICAN ENERGY Occupation MINER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 290.00	Date of Receipt MM / DD / YYYY 09 / 27 / 2010 Transaction ID: SA11.49361 Amount of Each Receipt this Period 290.00 CONTRIBUTION		
	<b>B.</b> Full Name (Last, First, Middle Initial) MR. WILLIAM POWELL Mailing Address 301 MAIN STREET UNIT 25H City State Zip Code SAN FRANCISCO CA 94105-5047 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer GRANITE CONSTRUCTION CO Occupation PROFESSIONAL DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.00	Date of Receipt MM / DD / YYYY 09 / 13 / 2010 Transaction ID: SA11.39388 Amount of Each Receipt this Period 2400.00 CONTRIBUTION	
		<b>C.</b> Full Name (Last, First, Middle Initial) MR. JAMES DAVID POWER, IV Mailing Address 1285 WHITE DOVE CIRCLE City State Zip Code WESTLAKE VILLAGE CA 91362-5227 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer SELF-EMPLOYED Occupation CONSULTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	Date of Receipt MM / DD / YYYY 08 / 19 / 2010 Transaction ID: SA11.27589 Amount of Each Receipt this Period 1000.00 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) .....	3690.00
TOTAL This Period (last page this line number only) .....	

10020734533



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 333 / 582

(check only one)

<input checked="" type="checkbox"/> X	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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. STEVEN PRADO Mailing Address 1525 VIA CARONEL City State Zip Code PALOS VERDES ESTAT CA 90274-1941 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 13 / 2010 Transaction ID: SA11.39373 Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
	Name of Employer Occupation OAKTREE CAPITAL MANAGEMENT ANALYST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) MS. ELAINE PRESCOTT Mailing Address 5315L WHITE OAK AVENUE City State Zip Code ENCINO CA 91316-2456 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 22 / 2010 Transaction ID: SA11.45227 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
	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 ▼ 1000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MR. NORM PRESSLEY Mailing Address 7617 PEPITA WAY City State Zip Code LA JOLLA CA 92037-5248 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 08 / 23 / 2010 Transaction ID: SA11.27724 Amount of Each Receipt this Period 500.00 CONTRIBUTION	
	Name of Employer Occupation SELF-EMPLOYED FARMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional) ..... ▶ 2500.00	
	TOTAL This Period (last page this line number only) ..... ▶	

10020749

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 334 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. NORM PRESSLEY Mailing Address 7617 PEPITA WAY City State Zip Code LA JOLLA CA 92037-5248 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 08 / 24 / 2010 Transaction ID: SA11.28202 Amount of Each Receipt this Period 500.00 CONTRIBUTION	
	Name of Employer SELF-EMPLOYED Occupation FARMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) MR. HENRY PRITCHOTT Mailing Address 33 SARAZEN City State Zip Code CORO DE CAZA CA 92679-5007 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 16 / 2010 Transaction ID: SA11.42747 Amount of Each Receipt this Period 2400.00 CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MR. ANTHONY N. PRITZKER Mailing Address 11111 SATNA MONICA BLVD SUITE 1650 City State Zip Code LOS ANGELES CA 90025-3350 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 15 / 2010 Transaction ID: SA11.40477 Amount of Each Receipt this Period 25000.00 CONTRIBUTION	
	Name of Employer THE PRITZKER GROUP Occupation MANAGING PARTNER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 25000.00	
	SUBTOTAL of Receipts This Page (optional) ..... ▶	27900.00
	TOTAL This Period (last page this line number only) ..... ▶	[ ]

10020734697

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 335 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. DANIEL E. PROCTOR Mailing Address 12006 E. PIKE STREET City State Zip Code SANTA FE SPRINGS CA 90670-2963 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 08 / 19 / 2010 Transaction ID: SA11.27576 Amount of Each Receipt this Period 500.00 CONTRIBUTION	
	Name of Employer Occupation TRI WEST LTD. WHOLESALE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 500.00	
	<b>B.</b> Full Name (Last, First, Middle Initial) MR. JAMES R. PROVOST Mailing Address 2103 W. RUE SAINT MICHEL City State Zip Code FRESNO CA 93711-1261 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 01 / 2010 Transaction ID: SA11.30298 Amount of Each Receipt this Period 250.00 CONTRIBUTION
	Name of Employer Occupation PROVOST & PRITCHARD ENGINEERING CIVIL ENGINEER 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) MRS. KAY PROVOST Mailing Address 2103 W. RUE SAINT MICHEL City State Zip Code FRESNO CA 93711-1261 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 01 / 2010 Transaction ID: SA11.30297 Amount of Each Receipt this Period 250.00 CONTRIBUTION	
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 250.00		
SUBTOTAL of Receipts This Page (optional) ..... ▶ 1000.00		
TOTAL This Period (last page this line number only) ..... ▶		

100207341000

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 336 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. CHARLES L. PRYOR Mailing Address P.O. BOX 161 City State Zip Code STURGIS KY 42459-0161 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 29 / 2010 Transaction ID: SA11.50687 Amount of Each Receipt this Period 300.00 CONTRIBUTION	
	Name of Employer Occupation MINE SAFE ELECTRONICS MANAGER 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) MR. TIMOTHY F. PSOMAS Mailing Address 601 N. BAYFRONT City State Zip Code BALBOA ISLAND CA 92662-1140 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 16 / 2010 Transaction ID: SA11.42743 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
	Name of Employer Occupation PSOMAS & ASSOCIATES ENGINEER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 1000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) DR. ALEXANDER PUE Mailing Address 3652 CARLETON STREET City State Zip Code SAN DIEGO CA 92106-2129 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 29 / 2010 Transaction ID: SA11.50848 Amount of Each Receipt this Period 500.00 CONTRIBUTION	
Name of Employer Occupation ASMG PHYSICIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 500.00		
SUBTOTAL of Receipts This Page (optional) ..... ▶ <b>1800.00</b>		
TOTAL This Period (last page this line number only) ..... ▶		

1002071415

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 337 / 582

(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

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NAME OF COMMITTEE (In Full)

CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. ANGELO JOSEPH PUNARO Mailing Address 5230 11TH ROAD N. City ARLINGTON State VA Zip Code 22205-2425 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2010 Transaction ID: SA11.40333 Amount of Each Receipt this Period 500.00 CONTRIBUTION
Name of Employer: BLUE STONE LOGIC Occupation: FOUNDING PARTNER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) MRS. JULIA F. PUNARO Mailing Address 6918 BONHEIM COURT City MCLEAN State VA Zip Code 22101-5100 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2010 Transaction ID: SA11.40332 Amount of Each Receipt this Period 500.00 CONTRIBUTION
Name of Employer: HOMEMAKER Occupation: HOMEMAKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) MR. KENNETH L. PURYEAR Mailing Address 3740 W. CALDWELL AVENUE City VISALIA State CA Zip Code 93277-9282 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2010 Transaction ID: SA11.36374 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
Name of Employer: PIONEER NURSERY Occupation: PARTNER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1000.00		
SUBTOTAL of Receipts This Page (optional) .....		2000.00
TOTAL This Period (last page this line number only) .....		

10020734700

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 338 / 582
	(check only one)
<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. ANDREW F. PUZDER</b>		Date of Receipt MM / DD / YYYY <b>08 / 24 / 2010</b>
Mailing Address <b>6307 CARPENTERIA AVE SUITE A</b>		Transaction ID: <b>SA11.28188</b>
City <b>CARPINTERIA</b>	State <b>CA</b>	Zip Code <b>93013-2908</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>15200.00</b>
Name of Employer <b>CKE RESTAURANTS</b>	Occupation <b>EXECUTIVE</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>25200.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. DEANNA D. PUZDER</b>		Date of Receipt MM / DD / YYYY <b>08 / 24 / 2010</b>
Mailing Address <b>6307 CARPENTERIA AVE SUITE A</b>		Transaction ID: <b>SA11.28191</b>
City <b>CARPINTERIA</b>	State <b>CA</b>	Zip Code <b>93013-2908</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>15200.00</b>
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>15200.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. JOHN QUICK</b>		Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
Mailing Address <b>231 BAYVIEW STREET</b>		Transaction ID: <b>SA11.47337</b>
City <b>SAN RAFAEL</b>	State <b>CA</b>	Zip Code <b>94901-4931</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>30900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734701

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 339 / 582
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. JAMES STEPHEN QUINN

Mailing Address 369 BELVEDERE STREET

City LA JOLLA State CA Zip Code 92037-5308

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN PROPERTY ENTERPRISES  
Occupation REAL ESTATE DEVELOPER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 09 / 21 / 2010  
Transaction ID: SA11.44100  
Amount of Each Receipt this Period 2400.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. JOHN F. QUINN

Mailing Address 6147 HUNTINGDALE CIRCLE

City STOCKTON State CA Zip Code 95219-1907

FEC ID number of contributing federal political committee. **C**

Name of Employer FOOD 4 LESS  
Occupation PRESIDENT/C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 35200.00

Date of Receipt 08 / 19 / 2010  
Transaction ID: SA11.27694  
Amount of Each Receipt this Period 35200.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MRS. PATRICIA A. QUINN

Mailing Address 6147 HUNTINGDALE CIRCLE

City STOCKTON State CA Zip Code 95219-1907

FEC ID number of contributing federal political committee. **C**

Name of Employer FOOD 4 LESS  
Occupation VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 35200.00

Date of Receipt 08 / 19 / 2010  
Transaction ID: SA11.27693  
Amount of Each Receipt this Period 35200.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 72800.00

TOTAL This Period (last page this line number only) ..... ▶

10020734702

**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 340 / 582
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. G. KIRK RAAB</b>		Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>518 CRESTA VISTA LANE</b>		Transaction ID: <b>SA11.29767</b>
City <b>PORTOLA VALLEY</b>	State <b>CA</b>	Zip Code <b>94028-7729</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2500.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>CONSULTANT</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2500.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. MARYANN RAAB</b>		Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>518 CRESTA VISTA LANE</b>		Transaction ID: <b>SA11.29753</b>
City <b>PORTOLA VALLEY</b>	State <b>CA</b>	Zip Code <b>94028-7729</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2500.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>CONSULTANT</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2500.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. STUART J. RABIN</b>		Date of Receipt MM / DD / YYYY <b>09 / 15 / 2010</b>
Mailing Address <b>502 PARK AVENUE PH. 27</b>		Transaction ID: <b>SA11.40484</b>
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10022-1108</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>NINE THIRTY CAPITAL</b>	Occupation <b>INVESTMENTS</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020714710



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 341 / 582
	(check only one)
<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MS. ALI RAFATI

Mailing Address 2479 FIELD ROSE DRIVE

City State Zip Code  
**SALT LAKE CITY UT 84121-1571**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**ENERGY SOLUTIONS EXECUTIVE VICE PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**09 / 09 / 2010**

Transaction ID: SA11.38738

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. PATRICK W. RAFFERTY

Mailing Address 9 LAPIS AVENUE

City State Zip Code  
**DANA POINT CA 92629-2971**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**COMMUNITY MEDICAL CENTER C.E.O.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**09 / 08 / 2010**

Transaction ID: SA11.36375

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
H. E. RAINBOLT

Mailing Address P.O. BOX 26788

City State Zip Code  
**OKLAHOMA CITY OK 73126-0788**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**BANC FIRST BANKING**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2400.00**

Date of Receipt  
**09 / 02 / 2010**

Transaction ID: SA11.33496

Amount of Each Receipt this Period  
**2400.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3900.00**

**TOTAL** This Period (last page this line number only) ..... ▶

1002073470

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 342 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) K. B. RAJANI		Date of Receipt MM / DD / YYYY 09 / 09 / 2010	
Mailing Address 7624 N. MARKS AVENUE		Transaction ID: SA11.38712	
City FRESNO	State CA	Zip Code 93711-0262	Amount of Each Receipt this Period 201.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	
<b>B.</b> Full Name (Last, First, Middle Initial) MR. JOHN RALLIS		Date of Receipt MM / DD / YYYY 09 / 13 / 2010	
Mailing Address P.O. BOX 1219		Transaction ID: SA11.39411	
City NEWPORT BEACH	State CA	Zip Code 92659-0019	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer CALIFORNIA EAGLE CORPORAT- ION		Occupation MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MR. FRANK C. RAMOS		Date of Receipt MM / DD / YYYY 08 / 23 / 2010	
Mailing Address P.O. BOX 175		Transaction ID: SA11.27722	
City WEST SACRAMENTO	State CA	Zip Code 95691-0175	Amount of Each Receipt this Period 4000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer RAMCO ENTERPRISES, INC.		Occupation PRESIDENT/MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional) .....	5201.00
TOTAL This Period (last page this line number only) .....	[ ]

10020734705

**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 343 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. KATHLEEN D. RAMOS

Mailing Address **2048 BANNER MINE COURT**

City **GOLD RIVER** State **CA** Zip Code **95670-7726**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BUZZ OATES GROUP** Occupation **COMMERCIAL REAL ESTATE**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 29 / 2010**  
Transaction ID: SA11.50753  
Amount of Each Receipt this Period **1000.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. VICTOR GEORGE RAMSAUER

Mailing Address **701 B. STREET #1300**

City **SAN DIEGO** State **CA** Zip Code **92101-8194**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LEVIT ZACKS** Occupation **CPA**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 13 / 2010**  
Transaction ID: SA11.39367  
Amount of Each Receipt this Period **500.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MRS. TAFFIN RAY

Mailing Address **16136 EL CAMINO REAL**

City **RANCHO SANTA FE** State **CA** Zip Code **92091-4596**

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 ▼ **2400.00**

Date of Receipt **09 / 13 / 2010**  
Transaction ID: SA11.39387  
Amount of Each Receipt this Period **2400.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... **3900.00**

**TOTAL** This Period (last page this line number only) .....

10020734705

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 344 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
MR. WILLIAM RAYMOND

Mailing Address P.O. BOX 915

City ROSS State CA Zip Code 94957-0915

FEC ID number of contributing federal political committee. **C**

Name of Employer RUTHERFORD INVESTMENTS Occupation PARTNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 09 / 22 / 2010

Transaction ID: SA11.45263

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. PATRICK D. REAUME

Mailing Address 681 BRADBURY DRIVE

City REDLANDS State CA Zip Code 92374-6381

FEC ID number of contributing federal political committee. **C**

Name of Employer REAUME BENEFITS Occupation INSURANCE BROKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2010

Transaction ID: SA11.40461

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MRS. BONNIE REED

Mailing Address 52925 STATE ROUTE 145

City BEALLSVILLE State OH Zip Code 43716-9358

FEC ID number of contributing federal political committee. **C**

Name of Employer REED EXCAVATING Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2010

Transaction ID: SA11.49365

Amount of Each Receipt this Period 400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3300.00

TOTAL This Period (last page this line number only) ..... ▶

10020734707

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 345 / 582

(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. JOEL REED</b>		Date of Receipt MM / DD / YYYY <b>08 / 24 / 2010</b>	
Mailing Address <b>4860 EL NIDO</b>		Transaction ID: <b>SA11.28182</b>	
City <b>RANCHO SANTA FE</b>	State <b>CA</b>	Zip Code <b>92067</b>	Amount of Each Receipt this Period <b>5000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>R.A. CAPITAL</b>	Occupation <b>FINANCE</b>	Aggregate Year-to-Date <b>5000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) <b>MR. JEFFREY REEVES</b>		Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>	
Mailing Address <b>3161 MICHELSON DRIVE</b>		Transaction ID: <b>SA11.47335</b>	
City <b>IRVINE</b>	State <b>CA</b>	Zip Code <b>92612-4400</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>GIBSON, DUNN &amp; CRUTCHER LLP</b>	Occupation <b>ATTORNEY</b>	Aggregate Year-to-Date <b>250.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) <b>MR. SIMON REEVES</b>		Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>	
Mailing Address <b>15 VERMILION CLIFFS</b>		Transaction ID: <b>SA11.58739</b>	
City <b>ALISO VIEJO</b>	State <b>CA</b>	Zip Code <b>92656-8096</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>GREENBURG GRAHAM ADVISORS LLC</b>	Occupation <b>WEALTH MANAGER</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073470

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 346 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MS. ADA REGAN**

Mailing Address **2260 REDDINGTON ROAD**

City **HILLSBOROUGH** State **CA** Zip Code **94010-6332**

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 ▼ **250.00**

Date of Receipt **08 / 26 / 2010**

Transaction ID: **SA11.29479**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**JIM REGUSCI**

Mailing Address **5584 SILVERADO TRAIL**

City **NAPA** State **CA** Zip Code **94558-9411**

FEC ID number of contributing federal political committee. **C**

Name of Employer **REGUSCI WINERY** Occupation **OWNER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **9269.85**

Date of Receipt **09 / 20 / 2010**

Transaction ID: **SA11.59667**

Amount of Each Receipt this Period **9269.85**

**CONTRIBUTION**

**IN-KIND: BEVERAGES**

**C.**

Full Name (Last, First, Middle Initial)  
**MR. ANDREW J. REID**

Mailing Address **28 BENNETT ROAD**

City **REDWOOD CITY** State **CA** Zip Code **94062-3202**

FEC ID number of contributing federal political committee. **C**

Name of Employer **COHN-REID-O'NEILL** Occupation **INSURANCE BROKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **08 / 19 / 2010**

Transaction ID: **SA11.27578**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **10519.85**

**TOTAL** This Period (last page this line number only) ..... ▶

11  
10  
09  
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**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 347 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) <b>MISS CLAIRE K.T. REISS</b>	Date of Receipt MM / DD / YYYY <b>08 / 24 / 2010</b>
	Mailing Address <b>9675 LA JOLLA FARMS ROAD</b>	Transaction ID: <b>SA11.28183</b>
	City <b>LA JOLLA</b> State <b>CA</b> Zip Code <b>92037-1132</b>	Amount of Each Receipt this Period <b>1000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>REAL ESTATE</b>	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

B.	Full Name (Last, First, Middle Initial) <b>MR. ROGER J. RESCHINI</b>	Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
	Mailing Address <b>922 PHILADELPHIA STREET</b>	Transaction ID: <b>SA11.49366</b>
	City <b>INDIANA</b> State <b>PA</b> Zip Code <b>15701-3940</b>	Amount of Each Receipt this Period <b>4800.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>RESCHINI AGENCY</b> Occupation <b>CEO</b>	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>4800.00</b>

C.	Full Name (Last, First, Middle Initial) <b>MRS. CHRISTINE M. RICH</b>	Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
	Mailing Address <b>18 EASTFIELD DRIVE</b>	Transaction ID: <b>SA11.58965</b>
	City <b>ROLLING HILLS</b> State <b>CA</b> Zip Code <b>90274-5261</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b> Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>8200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734710

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 348 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
MRS. JOANN RICH

Mailing Address 20 OUTRIDER ROAD

City ROLLING HILLS State CA Zip Code 90274-5232

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 ▼ 2400.00

Date of Receipt MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50739

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. JOHN W. RICH

Mailing Address 20 OUTRIDER ROAD

City ROLLING HILLS State CA Zip Code 90274-5232

FEC ID number of contributing federal political committee. **C**

Name of Employer RICH DEVELOPMENT Occupation REAL ESTATE/PARTNER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50757

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. JOSEPH WILLIAM RICH

Mailing Address 18 EASTFIELD DRIVE

City ROLLING HILLS State CA Zip Code 90274-5261

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58961

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 7200.00

TOTAL This Period (last page this line number only) ..... ▶

10020734711



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 349 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MR. JOHN RICHEL

Mailing Address 1606 CAMDEN WAY

City State Zip Code  
OKLAHOMA CITY OK 73116-5518

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
DEVON ENERGY PRESIDENT & C.E.O.

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 02 / 2010

Transaction ID: SA11.33500

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MRS. MARY RICHEY

Mailing Address 503 STILSON CANYON ROAD

City State Zip Code  
CHICO CA 95928-9119

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
SELF-EMPLOYED CONSULTANT

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 2300.00

Date of Receipt  
MM / DD / YYYY  
09 / 13 / 2010

Transaction ID: SA11.39384

Amount of Each Receipt this Period  
2300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MRS. AMELIA RICHTER

Mailing Address 22466 KARNAK ROAD

City State Zip Code  
KNOGHTS LANDING CA 95645-9405

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 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2010

Transaction ID: SA11.38678

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 3800.00

TOTAL This Period (last page this line number only)

10020734712

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 350 / 582

(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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. HENRY D. RICHTER, JR. Mailing Address 22466 KARNAK ROAD		Date of Receipt MM / DD / YYYY 09 / 09 / 2010 Transaction ID: SA11.38699	
City State Zip Code KNOGHTS LANDING CA 95645-9405		Amount of Each Receipt this Period 500.00 CONTRIBUTION	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation SELF-EMPLOYED FARMING			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	
<b>B.</b> Full Name (Last, First, Middle Initial) MR. P. ANTHONY RIDDER Mailing Address P.O. BOX 14		Date of Receipt MM / DD / YYYY 09 / 30 / 2010 Transaction ID: SA11.58943	
City State Zip Code PEBBLE BEACH CA 93953-0014		Amount of Each Receipt this Period 2400.00 CONTRIBUTION	
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 ▼ 2400.00	
<b>C.</b> Full Name (Last, First, Middle Initial) DR. BYRON W. RIEGEL Mailing Address 3027 W. KEOGH COURT		Date of Receipt MM / DD / YYYY 09 / 29 / 2010 Transaction ID: SA11.50827	
City State Zip Code VISALIA CA 93291-4228		Amount of Each Receipt this Period 500.00 CONTRIBUTION	
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 ▼ 500.00	
SUBTOTAL of Receipts This Page (optional) ..... ▶		3400.00	
TOTAL This Period (last page this line number only) ..... ▶		[Empty Box]	

10020734715

**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 351 / 582
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MRS. SARAH RINDLAUB	Date of Receipt MM / DD / YYYY 09 / 24 / 2010
Mailing Address 8441 SE 68TH STREET #217	Transaction ID: SA11.48316
City State Zip Code MERCER ISLAND WA 98040-5235	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
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.**

Full Name (Last, First, Middle Initial) MS. CATHERINE RITCH	Date of Receipt MM / DD / YYYY 09 / 24 / 2010
Mailing Address 504 VIA VAGUERO	Transaction ID: SA11.48283
City State Zip Code FAIRFIELD CA 94534-1546	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer Occupation BRADLEY RITCH MANAGEMENT CONSULTANTS OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

**C.**

Full Name (Last, First, Middle Initial) MR. CLARENCE J. RITCHIE	Date of Receipt MM / DD / YYYY 09 / 16 / 2010
Mailing Address 11878 AVENUE 328	Transaction ID: SA11.42685
City State Zip Code VISALIA CA 93291-9238	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer Occupation SELF-EMPLOYED SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional) .....	3250.00
TOTAL This Period (last page this line number only) .....	

10020734714

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 352 / 582
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. SHIRLEY RITCHIE

Mailing Address 11878 AVENUE 328

City VISALIA State CA Zip Code 93291-9238

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 ▼ 250.00

Date of Receipt 09 / 16 / 2010

Transaction ID: SA11.42680

Amount of Each Receipt this Period 250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MS. LINDA RIZZO

Mailing Address 5 BROADMOOR DRIVE

City SAN FRANCISCO State CA Zip Code 94132-2008

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 ▼ 500.00

Date of Receipt 08 / 26 / 2010

Transaction ID: SA11.29480

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. J. CRAIG ROACH

Mailing Address 40 RIDGEWOOD DRIVE

City MCDONALD State PA Zip Code 15057-4444

FEC ID number of contributing federal political committee. **C**

Name of Employer NALCO Occupation KEY ACCOUNT MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2010

Transaction ID: SA11.49368

Amount of Each Receipt this Period 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... 1000.00

TOTAL This Period (last page this line number only) .....

11  
12  
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**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 353 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. ALAN WARREN ROBBINS Mailing Address P.O. BOX 7175 City State Zip Code RANCHO SANTA FE CA 92067-7175 FEC ID number of contributing federal political committee. C Name of Employer RETIRED Occupation RETIRED 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 Y Y 09 / 23 / 2010 Transaction ID: SA11.45490 Amount of Each Receipt this Period 500.00 CONTRIBUTION		
	<b>B.</b> Full Name (Last, First, Middle Initial) MR. EVAN S. ROBBINS, III Mailing Address 1906 GREEN STREET APARTMENT 3 City State Zip Code SAN FRANCISCO CA 94123-4828 FEC ID number of contributing federal political committee. C Name of Employer THE SILVERFERN GROUP, INC. Occupation MANAGING DIRECTOR 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 Y Y 09 / 23 / 2010 Transaction ID: SA11.47366 Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
		<b>C.</b> Full Name (Last, First, Middle Initial) MRS. JUDITH ROBBINS Mailing Address P.O. BOX 7175 City State Zip Code RANCHO SANTA FE CA 92067-7175 FEC ID number of contributing federal political committee. C Name of Employer RETIRED Occupation RETIRED 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 Y Y 09 / 23 / 2010 Transaction ID: SA11.45489 Amount of Each Receipt this Period 500.00 CONTRIBUTION
			SUBTOTAL of Receipts This Page (optional) ..... ▶ 2000.00 TOTAL This Period (last page this line number only) ..... ▶

10020734718

**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 354 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>L. DEDE ROBBINS</b>	Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>219 MONTANA AVENUE #304</b>	Transaction ID: <b>SA11.29709</b>
City <b>SANTA MONICA</b> State <b>CA</b> Zip Code <b>90403-1142</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>DREYER, EDMONDS &amp; ROBBINS</b> Occupation <b>C.P.A.</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. DUANE R. ROBERTS</b>	Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>
Mailing Address <b>4100 NEWPORT PLACE SUITE 400</b>	Transaction ID: <b>SA11.27663</b>
City <b>NEWPORT BEACH</b> State <b>CA</b> Zip Code <b>92660-2450</b>	Amount of Each Receipt this Period <b>30400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>ENTREPRENEURIAL CAPITAL CORPORATION</b> Occupation <b>C.E.O.</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>30400.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. JEFFREY B. ROBERTS</b>	Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
Mailing Address <b>8 INDIGO</b>	Transaction ID: <b>SA11.58917</b>
City <b>IRVINE</b> State <b>CA</b> Zip Code <b>92618-3958</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>WAXIE SANITARY SUPPLY</b> Occupation <b>EXECUTIVE VICE PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>31400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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**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 355 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. FRANK ROBSON**

Mailing Address **P.O. BOX 986**

City **CLAREMORE** State **OK** Zip Code **74018-0986**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **R/E DEVELOPER, BANKER, RANCHER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt **09 / 08 / 2010**  
 Transaction ID: **SA11.36368**  
 Amount of Each Receipt this Period **1200.00**  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. LUDMILA ROBSON**

Mailing Address **P.O. BOX 986**

City **CLAREMORE** State **OK** Zip Code **74018-0986**

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 ▼ **1200.00**

Date of Receipt **09 / 08 / 2010**  
 Transaction ID: **SA11.36410**  
 Amount of Each Receipt this Period **1200.00**  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. GEORGE RODRIGUEZ**

Mailing Address **2167 W. LINDA VISTA**

City **PORTERVILLE** State **CA** Zip Code **93257-9527**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GRAPEMAN LABOR, INC.** Occupation **PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 24 / 2010**  
 Transaction ID: **SA11.48284**  
 Amount of Each Receipt this Period **500.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2900.00**

**TOTAL** This Period (last page this line number only) ..... ▶

10020734718

**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 356 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT LOUIS RODRIGUEZ**

Mailing Address **P.O. BOX 227**

City **ZEPHYR COVE** State **NV** Zip Code **89448-0227**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FIRST PACIFIC ADVISORS, L.L.C.** Occupation **INVESTMENT PROFESSIONAL**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date **4800.00**

Date of Receipt **09 / 22 / 2010**

Transaction ID: **SA11.45233**

Amount of Each Receipt this Period **4800.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. SUZANNE D. RODRIGUEZ**

Mailing Address **P.O. BOX 227**

City **ZEPHYR COVE** State **NV** Zip Code **89448-0227**

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 **4800.00**

Date of Receipt **09 / 22 / 2010**

Transaction ID: **SA11.45229**

Amount of Each Receipt this Period **4800.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD K. ROEDER**

Mailing Address **11150 SANTA MONICA BLVD. SUITE 750**

City **LOS ANGELES** State **CA** Zip Code **90025-0528**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VANCE STREET CAPITAL** Occupation **PARTNER**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date **15000.00**

Date of Receipt **09 / 13 / 2010**

Transaction ID: **SA11.39362**

Amount of Each Receipt this Period **15000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **24600.00**

**TOTAL** This Period (last page this line number only) .....

10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 357 / 582  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) MR. JESSE THOMAS ROGERS</p> <p>Mailing Address 278 PARK LANE</p> <p>City State Zip Code ATHERTON CA 94027-5457</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation ALAMONT CAPITAL PARTNERS INVESTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2400.00</p>	<p>Date of Receipt MM / DD / YYYY 09 / 15 / 2010</p> <p>Transaction ID: SA11.40453</p> <p>Amount of Each Receipt this Period 2400.00</p> <p>CONTRIBUTION</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) MRS. KATHLEEN ROGERS</p> <p>Mailing Address 6301 BULLARD DRIVE</p> <p>City State Zip Code OAKLAND CA 94611-3111</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation HOMEMAKER HOMEMAKER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 30400.00</p>	<p>Date of Receipt MM / DD / YYYY 09 / 24 / 2010</p> <p>Transaction ID: SA11.48135</p> <p>Amount of Each Receipt this Period 30400.00</p> <p>CONTRIBUTION</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) MR. RYAN ROGERS</p> <p>Mailing Address 1716 BRADLEY ESTATES DRIVE</p> <p>City State Zip Code YUBA CITY CA 95993-1644</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation LAKEVIEW ENERGY PRESIDENT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 09 / 16 / 2010</p> <p>Transaction ID: SA11.42683</p> <p>Amount of Each Receipt this Period 500.00</p> <p>CONTRIBUTION</p>
<p>SUBTOTAL of Receipts This Page (optional) .....</p>	<p>33300.00</p>
<p>TOTAL This Period (last page this line number only) .....</p>	<p></p>

10020734720

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 358 / 582
(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)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) <b>MR. T. GARY ROGERS</b>	Date of Receipt MM / DD / YYYY <b>09 / 24 / 2010</b>
	Mailing Address <b>6301 BULLARD DRIVE</b>	Transaction ID: <b>SA11.48136</b>
	City <b>OAKLAND</b> State <b>CA</b> Zip Code <b>94611-3111</b>	Amount of Each Receipt this Period <b>30400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>30400.00</b>

B.	Full Name (Last, First, Middle Initial) <b>MR. TIM ROGERS</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
	Mailing Address <b>1416 PASEO LACRESTA</b>	Transaction ID: <b>SA11.33459</b>
	City <b>PALOS VERDES ESTAT</b> State <b>CA</b> Zip Code <b>90274-2073</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>TOWER ENERGY GROUP</b> Occupation <b>OWNER</b>	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

C.	Full Name (Last, First, Middle Initial) <b>MRS. TWANNA ROGERS</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
	Mailing Address <b>1416 PASEO LACRESTA</b>	Transaction ID: <b>SA11.33453</b>
	City <b>PALOS VERDES ESTAT</b> State <b>CA</b> Zip Code <b>90274-2073</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>TOWER</b> Occupation <b>OWNER</b>	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>35200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734721

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 359 / 582

(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. JOHN ROGITZ**

Mailing Address **750 B. STREET #3120**

City State Zip Code  
**SAN DIEGO CA 92101-8105**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**SELF-EMPLOYED SELF-EMPLOYED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt

**09 / 29 / 2010**

Transaction ID: **SA11.50775**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MRS. CAROLINE M. ROMEO**

Mailing Address **158 VALDEFLORES DRIVE**

City State Zip Code  
**BURLINGAME CA 94010-5972**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**ROMEO PACKING COMPANY OWNER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt

**08 / 19 / 2010**

Transaction ID: **SA11.27575**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**LARREE M. RONDA**

Mailing Address **450 MOSELEY ROAD**

City State Zip Code  
**HILLSBOROUGH CA 94010-6716**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**SAFEWAY INC. EXECUTIVE VICE PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**08 / 19 / 2010**

Transaction ID: **SA11.27579**

Amount of Each Receipt this Period

**250.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

**1250.00**

**TOTAL** This Period (last page this line number only) .....

10020734722

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 360 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. FRANK E. ROQUE, JR. Mailing Address 7081 N. MARKS #104-131 City FRESNO State CA Zip Code 93711-0232 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 24 / 2010 Transaction ID: SA11.48276 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
Name of Employer PAROCHE CREEK PACKING Occupation EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) MR. MICHAEL D. ROSE Mailing Address 999 S. SHADY GROVE SUITE 303 City MEMPHIS State TN Zip Code 38120-4126 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2010 Transaction ID: SA11.36439 Amount of Each Receipt this Period 2400.00 CONTRIBUTION
Name of Employer FIRST HORIZON NATIONAL CO-RPORATION Occupation EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.00		
<b>C.</b> Full Name (Last, First, Middle Initial) MR. JAY L. ROSENLIEB Mailing Address 4550 CALIFORNIA AVENUE FLOOR 2 City BAKERSFIELD State CA Zip Code 93309-7012 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 09 / 2010 Transaction ID: SA11.38703 Amount of Each Receipt this Period 2400.00 CONTRIBUTION
Name of Employer KLEIN, DENATALE, GOLDNER Occupation ATTORNEY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.00		
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		5800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

10020734723

**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 361 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MS. MELISSA ROSENGARD**

Mailing Address **6647 FORESTLAND WAY**

City **OAKLAND** State **CA** Zip Code **94611-1523**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CHABOT SPACE & SCIENCE CENTER** Occupation **DIRECTOR OF DEVELOPMENT**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 22 / 2010**

Transaction ID: **SA11.45221**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD M. ROSENBERG**

Mailing Address **955 GREEN STREET #5**

City **SAN FRANCISCO** State **CA** Zip Code **94133-5427**

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 **09 / 03 / 2010**

Transaction ID: **SA11.33572**

Amount of Each Receipt this Period **2000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT M. ROSENTHAL**

Mailing Address **4444 W. RIVERSIDE DRIVE #303**

City **BURBANK** State **CA** Zip Code **91505-4077**

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 ▼ **2400.00**

Date of Receipt **09 / 30 / 2010**

Transaction ID: **SA11.58760**

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **4900.00**

**TOTAL** This Period (last page this line number only) .....

1002073472

**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 362 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. NANCY A. ROSS

Mailing Address 2870 S. LINDBERGH

City SAINT LOUIS State MO Zip Code 63131-4807

FEC ID number of contributing federal political committee. **C**

Name of Employer COMMUNITY VOLUNTEER Occupation COMMUNITY VOLUNTEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 02 / 2010

Transaction ID: SA11.33504

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. LOUIS ROSSETTO

Mailing Address 1732 LAVEREDA

City BERKELEY State CA Zip Code 94709-1023

FEC ID number of contributing federal political committee. **C**

Name of Employer FORCA Occupation DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2010

Transaction ID: SA11.45222

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. TED F. ROSSIN

Mailing Address 1880 NIRVANA AVENUE

City CHULA VISTA State CA Zip Code 91911-6118

FEC ID number of contributing federal political committee. **C**

Name of Employer ROSSIN STEEL INC. Occupation OWNER / CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 09 / 13 / 2010

Transaction ID: SA11.39397

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3900.00

TOTAL This Period (last page this line number only) ..... ▶

10020734725

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 363 / 582

(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)

CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. SAMUEL C. ROTANDO		Date of Receipt MM / DD / YYYY 09 / 08 / 2010	
Mailing Address 849 10TH STREET		Transaction ID: SA11.36440	
City MANHATTAN BEACH	State CA	Zip Code 90266-5874	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer OAKTREE CAPITAL MANAGEMENT	Occupation FINANCE	Aggregate Year-to-Date 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) MRS. SUSAN E. ROWE		Date of Receipt MM / DD / YYYY 09 / 09 / 2010	
Mailing Address 13106 QUEEN PALM COURT		Transaction ID: SA11.38709	
City BAKERSFIELD	State CA	Zip Code 93314-6515	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer HOMEMAKER	Occupation HOMEMAKER	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) MR. HERMAN G. ROWLAND, SR.		Date of Receipt MM / DD / YYYY 09 / 24 / 2010	
Mailing Address 1 JELLY BELLY LANE		Transaction ID: SA11.48298	
City FAIRFIELD	State CA	Zip Code 94533-6722	Amount of Each Receipt this Period 30400.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer JELLY BELLY CANDY COMPANY	Occupation EXECUTIVE	Aggregate Year-to-Date 30400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) .....	31900.00
TOTAL This Period (last page this line number only) .....	[ ]

10020734725

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 364 / 582
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
<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)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) MRS. PATRICIA RUE	Date of Receipt
	<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
Mailing Address P.O. BOX 8	Transaction ID: SA11.42758
City RIO OSO State CA Zip Code 95674-0008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	<input type="text" value="1000.00"/>
Name of Employer SELF EMPLOYED Occupation FARMER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼
	<input type="text" value="1000.00"/>

B. Full Name (Last, First, Middle Initial) MRS. HEATHER ASHER RUEGG	Date of Receipt
	<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
Mailing Address 335 MOUNTAIN AVENUE	Transaction ID: SA11.47367
City PIEDMONT State CA Zip Code 94611-3507	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	<input type="text" value="2000.00"/>
Name of Employer HOMEMAKER Occupation HOMEMAKER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼
	<input type="text" value="2000.00"/>

C. Full Name (Last, First, Middle Initial) CHRIS J. RUFER	Date of Receipt
	<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
Mailing Address 724 MAIN STREET	Transaction ID: SA11.30362
City WOODLAND State CA Zip Code 95695-3491	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	<input type="text" value="2400.00"/>
Name of Employer THE MORNING STAR COMPANY Occupation AGRICULTURIST	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼
	<input type="text" value="2400.00"/>

SUBTOTAL of Receipts This Page (optional) .....	<input type="text" value="5400.00"/>
TOTAL This Period (last page this line number only) .....	<input type="text"/>

10020734727



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 365 / 582
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. H. JON RUNSTAD

Mailing Address 1201 THIRD AVENUE  
SUITE 2700

City SEATTLE State WA Zip Code 98101-3221

FEC ID number of contributing federal political committee. **C**

Name of Employer WRIGHT RUNSTAD & COMPANY Occupation PARTNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

Transaction ID: SA11.48334

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MS. FAYE H. RUSSELL

Mailing Address 12636 HIGH BLUFF DRIVE  
SUITE 400

City SAN DIEGO State CA Zip Code 92130-2071

FEC ID number of contributing federal political committee. **C**

Name of Employer LATHAM & WATKINS L.L.P. Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58730

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. ANTHONY RUSSO

Mailing Address 1804 MASON ROAD

City FAIRFIELD State CA Zip Code 94534-9607

FEC ID number of contributing federal political committee. **C**

Name of Employer A.D.R. CONSULTING Occupation PRINCIPAL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7500.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2010

Transaction ID: SA11.49480

Amount of Each Receipt this Period  
7500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 9000.00

TOTAL This Period (last page this line number only) ..... ▶

1002074728

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 366 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. ANN K. RYDER		Date of Receipt MM / DD / YYYY 09 / 24 / 2010	
Mailing Address 1107 ESTATES DRIVE		Transaction ID: SA11.48327	
City LAFAYETTE	State CA	Zip Code 94549-2748	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	
<b>B.</b> Full Name (Last, First, Middle Initial) MR. NED K. RYDER		Date of Receipt MM / DD / YYYY 09 / 24 / 2010	
Mailing Address 1107 ESTATES DRIVE		Transaction ID: SA11.48348	
City LAFAYETTE	State CA	Zip Code 94549-2748	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MS. ANITA M. SABINSKE		Date of Receipt MM / DD / YYYY 09 / 17 / 2010	
Mailing Address 1150 LOMBARD STREET		Transaction ID: SA11.43484	
City SAN FRANCISCO	State CA	Zip Code 94109-9102	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer CASHIN COMPANY		Occupation REALTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional) ..... ▶		2000.00	
TOTAL This Period (last page this line number only) ..... ▶		[Empty Box]	

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**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 367 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. JOHN SACCO		Date of Receipt MM / DD / YYYY 08 / 23 / 2010	
Mailing Address 1620 E. BRUNDAGE LANE		Transaction ID: SA11.27710	
City BAKERSFIELD	State CA	Zip Code 93307-2756	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer SIERRA INTERNATIONAL MACHINERY	Occupation VICE PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) MR. THOMAS C. SADLER		Date of Receipt MM / DD / YYYY 09 / 22 / 2010	
Mailing Address 2024 ASHBOURNE DRIVE		Transaction ID: SA11.45258	
City S. PASADENA	State CA	Zip Code 91030-3908	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer LATHAM & WATKINS	Occupation ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) MR. JIM SAFFELL		Date of Receipt MM / DD / YYYY 09 / 27 / 2010	
Mailing Address 60666 N. ANDERSON RUN ROAD		Transaction ID: SA11.49371	
City JACOBSBURG	State OH	Zip Code 43933	Amount of Each Receipt this Period 390.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer OHIO VALLEY COAL	Occupation MAINTENANCE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00		
SUBTOTAL of Receipts This Page (optional) .....		6390.00	
TOTAL This Period (last page this line number only) .....		[ ]	

10020734730

**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 368 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. JEAN PIERRE SAGOUSPE</b>	Date of Receipt MM / DD / YYYY <b>09 / 03 / 2010</b>
Mailing Address <b>259 I. STREET</b>	Transaction ID: <b>SA11.33557</b>
City <b>LOS BANOS</b> State <b>CA</b> Zip Code <b>93635-4114</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>FARMER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. KATRINA SAMPLEY</b>	Date of Receipt MM / DD / YYYY <b>08 / 30 / 2010</b>
Mailing Address <b>373 BREA HILLS AVENUE</b>	Transaction ID: <b>SA11.29657</b>
City <b>BREA</b> State <b>CA</b> Zip Code <b>92823-1803</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL H. SAMSON</b>	Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>619 47TH AVENUE</b>	Transaction ID: <b>SA11.39353</b>
City <b>SAN FRANCISCO</b> State <b>CA</b> Zip Code <b>94121-2407</b>	Amount of Each Receipt this Period <b>1500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>CONSULTANT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734731

**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 369 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JERRY SANDERS, III**

Mailing Address **10659 BELLAGIO ROAD**

City **LOS ANGELES** State **CA** Zip Code **90077-3712**

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 ▼ **2400.00**

Date of Receipt **09 / 24 / 2010**

Transaction ID: **SA11.48336**

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. NANCY SANDERGREN**

Mailing Address **5188 FOREST OAK COURT**

City **BROWNS VALLEY** State **CA** Zip Code **95918-9769**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 09 / 2010**

Transaction ID: **SA11.38676**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. STEVEN SANDERGREN**

Mailing Address **5188 FOREST OAK COURT**

City **BROWNS VALLEY** State **CA** Zip Code **95918-9769**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **INVESTOR**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 09 / 2010**

Transaction ID: **SA11.38698**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2900.00**

**TOTAL** This Period (last page this line number only) ..... ▶

10020734732

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 370 / 582
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. TAWNY LEE SANDERS**

Mailing Address **10659 BELLAGIO ROAD**

City **LOS ANGELES** State **CA** Zip Code **90077-3712**

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 ▼ **2400.00**

Date of Receipt **09 / 24 / 2010**  
**Transaction ID: SA11.48337**  
 Amount of Each Receipt this Period **2400.00**  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MS. DIANE D. SANDIDGE**

Mailing Address **1700 29 ASHE ROAD**

City **BAKERSFIELD** State **CA** Zip Code **93309-3605**

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 ▼ **500.00**

Date of Receipt **08 / 26 / 2010**  
**Transaction ID: SA11.29471**  
 Amount of Each Receipt this Period **500.00**  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROB V. SAROYAN**

Mailing Address **2095 W. BARSTOW**

City **FRESNO** State **CA** Zip Code **93711-2802**

FEC ID number of contributing federal political committee. **C**

Name of Employer **COMMUNITY HOSPITALS OF CENTRAL CALIFOR** Occupation **HOSPITAL ADMINISTRATOR**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 01 / 2010**  
**Transaction ID: SA11.30283**  
 Amount of Each Receipt this Period **500.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **3400.00**

**TOTAL** This Period (last page this line number only) .....

10020734733

**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 371 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MS. DEBRA SAUNDERS</b>	Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
	Mailing Address <b>2505 WHITE PINE LANE</b>	Transaction ID: <b>SA11.47341</b>
	City <b>PARK CITY</b> State <b>UT</b> Zip Code <b>84060-6500</b>	Amount of Each Receipt this Period <b>2000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2000.00</b>	

<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MR. HY SAUNDERS</b>	Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
	Mailing Address <b>2505 W. WHITE PINE LANE</b>	Transaction ID: <b>SA11.38737</b>
	City <b>PARK CITY</b> State <b>UT</b> Zip Code <b>84060-6500</b>	Amount of Each Receipt this Period <b>2000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>LAND DEVELOPER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2000.00</b>	

<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. FRANK L. SAVIEZ</b>	Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
	Mailing Address <b>6695 N. DICKENSON AVENUE</b>	Transaction ID: <b>SA11.36452</b>
	City <b>FRESNO</b> State <b>CA</b> Zip Code <b>93723-9453</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>FARMER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4500.00</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: (check only one)	PAGE 372 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. GARY W. SAWYERS</b>		Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>652 W. CROMWELL AVENUE SUITE 101</b>		Transaction ID: <b>SA11.29744</b>
City <b>FRESNO</b>	State <b>CA</b>	Zip Code <b>93711-5715</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>SAWYERS &amp; HOLLAND, L.L.P.</b>		CONTRIBUTION
Occupation <b>ATTORNEY</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. CHRISTOPHER SCANGAS</b>		Date of Receipt MM / DD / YYYY <b>09 / 08 / 2010</b>
Mailing Address <b>7810 SENDERO ANGELICA</b>		Transaction ID: <b>SA11.36434</b>
City <b>SAN DIEGO</b>	State <b>CA</b>	Zip Code <b>92127-2553</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>SELF-EMPLOYED</b>		CONTRIBUTION
Occupation <b>REAL ESTATE</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. STEVE SCARONI</b>		Date of Receipt MM / DD / YYYY <b>08 / 27 / 2010</b>
Mailing Address <b>P.O. BOX 1550</b>		Transaction ID: <b>SA11.29537</b>
City <b>HEBER</b>	State <b>CA</b>	Zip Code <b>92249-1550</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>VALLEY HARVESTING &amp; PACKING, INC.</b>		CONTRIBUTION
Occupation <b>PRESIDENT</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734733



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 373 / 582  
(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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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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. GEORGE A. SCHMIDBAUER**

Mailing Address **1615 FICKLE HILL ROAD**

City **ARCATA** State **CA** Zip Code **95521-9027**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **LUMBERMAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50865**

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MR. CRAIG D. SCHNUCK**

Mailing Address **11420 LACKLAND ROAD**

City **SAINT LOUIS** State **MO** Zip Code **63146-3559**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SCHNUCKS** Occupation **CHAIRMAN OF EXECUTIVE COMMITTEE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **09 / 02 / 2010**

Transaction ID: **SA11.33505**

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**MR. SCOTT C. SCHNUCK**

Mailing Address **15 UPPER LADUE ROAD**

City **SAINT LOUIS** State **MO** Zip Code **63124-1675**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SCHNUCKS** Occupation **CHAIRMAN & C.E.O.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **09 / 02 / 2010**

Transaction ID: **SA11.33506**

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **7200.00**

**TOTAL** This Period (last page this line number only) .....

100207134735

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 374 / 582

(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)  
CARLY VICTORY COMMITTEE

**A.**

Full Name (Last, First, Middle Initial) MR. TODD R. SCHNUCK		Date of Receipt MM / DD / YYYY 09 / 02 / 2010	
Mailing Address 11420 LACKLAND ROAD		Transaction ID: SA11.33507	
City SAINT LOUIS	State MO	Zip Code 63146-3559	Amount of Each Receipt this Period 2400.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer SCHNUCKS	Occupation PRESIDENT & C.O.O.	Aggregate Year-to-Date 2400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) MRS. DESPINA SCHRADER		Date of Receipt MM / DD / YYYY 09 / 16 / 2010	
Mailing Address 701 ELLIS ROAD		Transaction ID: SA11.42720	
City MARYSVILLE	State CA	Zip Code 95901-3005	Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	Aggregate Year-to-Date 375.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) MRS. DESPINA SCHRADER		Date of Receipt MM / DD / YYYY 09 / 16 / 2010	
Mailing Address 701 ELLIS ROAD		Transaction ID: SA11.42755	
City MARYSVILLE	State CA	Zip Code 95901-3005	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	Aggregate Year-to-Date 375.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) .....	2775.00
TOTAL This Period (last page this line number only) .....	

10020734737

**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 375 / 582
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. ERNST SCHROEDER Mailing Address 7601 AVENIDA VALEDOR City BAKERSFIELD State CA Zip Code 93309-2780 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 08 / 26 / 2010 Transaction ID: SA11.29470 Amount of Each Receipt this Period 500.00 CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

<b>B.</b> Full Name (Last, First, Middle Initial) MR. ERNIE SCHROEDER, JR. Mailing Address P.O. BOX 1178 City BAKERSFIELD State CA Zip Code 93302-1178 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 03 / 2010 Transaction ID: SA11.33560 Amount of Each Receipt this Period 500.00 CONTRIBUTION
	Name of Employer JESS SMITH & SONS COTTON Occupation COTTON MERCHANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

<b>C.</b> Full Name (Last, First, Middle Initial) MRS. JOELLYN SCHROEDER Mailing Address 7601 AVENIDA VALEDOR City BAKERSFIELD State CA Zip Code 93309-2780 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 08 / 26 / 2010 Transaction ID: SA11.29493 Amount of Each Receipt this Period 500.00 CONTRIBUTION
	Name of Employer JESS SMITH & SONS Occupation COTTON MERCHANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional) .....	1500.00
TOTAL This Period (last page this line number only) .....	

10020734738

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 376 / 582
	(check only one)
<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KENNETH SCHROEDER**

Mailing Address **14545 MANUELLA ROAD**

City **LOS ALTOS HILLS** State **CA** Zip Code **94022-2024**

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 **09 / 08 / 2010**

Transaction ID: **SA11.36421**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. DON SCHWARZ**

Mailing Address **4047 DIXIE CANYON AVENUE**

City **SHERMAN OAKS** State **CA** Zip Code **91423-4831**

FEC ID number of contributing federal political committee. **C**

Name of Employer **R.B.C. WEALTH MANAGEMENT** Occupation **PORTFOLIO MANAGER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 15 / 2010**

Transaction ID: **SA11.40463**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MS. HELEN O. SCHWAB**

Mailing Address **188 FAIR OAKS LANE**

City **ATHERTON** State **CA** Zip Code **94027-3032**

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 ▼ **15400.00**

Date of Receipt **08 / 03 / 2010**

Transaction ID: **SA11.26301**

Amount of Each Receipt this Period **15400.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **16900.00**

**TOTAL** This Period (last page this line number only) ..... ▶

130207134713

**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 377 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MRS. SUSAN SCHWARZ		Date of Receipt MM / DD / YYYY 09 / 15 / 2010
Mailing Address 4047 DIXIE CANYON AVENUE		Transaction ID: SA11.40449
City SHERMAN OAKS	State CA	Zip Code 91423-4831
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) MRS. CARLLEEN SCOTT		Date of Receipt MM / DD / YYYY 09 / 22 / 2010
Mailing Address 51 SPANISH BAY CIRCLE		Transaction ID: SA11.45285
City PEBBLE BEACH	State CA	Zip Code 93953-2656
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**C.**

Full Name (Last, First, Middle Initial) MR. HUGH SCOTT, III		Date of Receipt MM / DD / YYYY 09 / 02 / 2010
Mailing Address 501 N. BROADWAY		Transaction ID: SA11.33501
City SAINT LOUIS	State MO	Zip Code 63102-2131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
Name of Employer STIFEL, NICOLAUS & WEISEL	Occupation INVESTMENT BANKER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional) .....	3150.00
TOTAL This Period (last page this line number only) .....	

10020714740

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 378 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. LARY R. SCOTT Mailing Address 51 SPANISH BAY CIRCLE City State Zip Code PEBBLE BEACH CA 93953-2656 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y 09 / 22 / 2010 Transaction ID: SA11.45265 Amount of Each Receipt this Period 250.00 CONTRIBUTION	
	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	
	Full Name (Last, First, Middle Initial) MRS. MARY B. SCRIVNER Mailing Address 25461 W. FREMONT ROAD City State Zip Code LOS ALTOS HILLS CA 94022-3538 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y 09 / 21 / 2010 Transaction ID: SA11.44113 Amount of Each Receipt this Period 7600.00 CONTRIBUTION
	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 ▼ 7600.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MR. MICHAEL SEARLES Mailing Address P.O. BOX 206 City State Zip Code RANCHO SANTA FE CA 92067-0206 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y 09 / 15 / 2010 Transaction ID: SA11.40331 Amount of Each Receipt this Period 500.00 CONTRIBUTION	
	Name of Employer Occupation SELF-EMPLOYED RETAILER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) ..... ▶ 8350.00	
	TOTAL This Period (last page this line number only) ..... ▶	

110020744741

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 379 / 582
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN H. SEARS**

Mailing Address **21 BLACKBERRY COURT**

City **LAFAYETTE** State **CA** Zip Code **94549-2334**

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 ▼ **250.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50667**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. JUDY SEARS**

Mailing Address **21 BLACKBERRY COURT**

City **LAFAYETTE** State **CA** Zip Code **94549-2334**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50612**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. PHIL SEBULSKY**

Mailing Address **10 CLAY AVENUE**

City **WHEELING** State **WV** Zip Code **26003-5314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SEBULSKY INDUSTRIES INC.** Occupation **PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt **09 / 27 / 2010**

Transaction ID: **SA11.49373**

Amount of Each Receipt this Period **1200.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1700.00**

**TOTAL** This Period (last page this line number only) ..... ▶

10020734742

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 380 / 582

(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)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JAMES RONALD SECHRIST	Date of Receipt MM / DD / YYYY 09 / 29 / 2010
	Mailing Address 301 MORNINGSTAR LANE	Transaction ID: SA11.50856
	City State Zip Code NEWPORT BEACH CA 92660-5710	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
B.	Full Name (Last, First, Middle Initial) MR. HENRY T. SEGERSTROM	Date of Receipt MM / DD / YYYY 08 / 12 / 2010
	Mailing Address 1617 E BAY AVE	Transaction ID: SA11.26295
	City State Zip Code NEWPORT BEACH CA 92661-1430	Amount of Each Receipt this Period 30400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer CJ SEGERSTROM AND SONS	Occupation REAL ESTATE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30400.00	
C.	Full Name (Last, First, Middle Initial) MR. JOHN H. SEITER	Date of Receipt MM / DD / YYYY 09 / 23 / 2010
	Mailing Address 534 PALMETTO DRIVE	Transaction ID: SA11.47377
	City State Zip Code PASADENA CA 91105-1609	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional) .....		36400.00
TOTAL This Period (last page this line number only) .....		

10020734743



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 381 / 582

(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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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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. MARTIN SELIG		Date of Receipt MM / DD / YYYY 09 / 24 / 2010	
Mailing Address 1000 2ND AVENUE SUITE 1800		Transaction ID: SA11.48295	
City SEATTLE	State WA	Zip Code 98104-3619	Amount of Each Receipt this Period 2400.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE DEVELOPER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00		

<b>B.</b> Full Name (Last, First, Middle Initial) MR. KHOSROW B. SEMNANI		Date of Receipt MM / DD / YYYY 09 / 09 / 2010	
Mailing Address P.O. BOX 11623		Transaction ID: SA11.38736	
City SALT LAKE CITY	State UT	Zip Code 84147-0623	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer SK HART	Occupation PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>C.</b> Full Name (Last, First, Middle Initial) MR. ANDREW E. SENYEI		Date of Receipt MM / DD / YYYY 09 / 21 / 2010	
Mailing Address 1547 EL CAMINO DEL TEATRO		Transaction ID: SA11.44123	
City LA JOLLA	State CA	Zip Code 92037-6301	Amount of Each Receipt this Period 2400.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer ENTERPRISE PARTNERS VENTURE CAPITAL	Occupation FINANCE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00		

SUBTOTAL of Receipts This Page (optional) .....	5800.00
TOTAL This Period (last page this line number only) .....	[ ]

10020734744

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 382 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. ANDREW B. SESSIONS Mailing Address 12 MARLBOROUGH COURT City State Zip Code PIEDMONT CA 94611-3608 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 17 / 2010 Transaction ID: SA11.43494 Amount of Each Receipt this Period 1500.00 CONTRIBUTION	
	Name of Employer THOMAS WEISEL PARTNERS Occupation VENTURE CAPITALIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00	
	Full Name (Last, First, Middle Initial) MRS. CINDRA SEVERNS Mailing Address 1710 N. VIAU AVENUE City State Zip Code SANGER CA 93657-9610 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 09 / 2010 Transaction ID: SA11.38720 Amount of Each Receipt this Period 500.00 CONTRIBUTION
	Name of Employer CHAPTER ONE SCHOOL Occupation DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MR. KEVIN D. SEVERNS Mailing Address 1710 N. VIAU AVENUE City State Zip Code SANGER CA 93657-9610 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 09 / 2010 Transaction ID: SA11.38746 Amount of Each Receipt this Period 500.00 CONTRIBUTION	
	Name of Employer ORANGE COVE-SANGER CITRUS ASSOC. Occupation CITRUS PACKING MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) ..... ▶ 2500.00	
	TOTAL This Period (last page this line number only) ..... ▶	

10020734745

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 383 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MR. JAMES SEWELL</b>	Date of Receipt MM / DD / YYYY <b>08 / 23 / 2010</b>
	Mailing Address <b>2665 MERCANTILE DRIVE SUNRISE MANUFACTURING, INC.</b>	Transaction ID: <b>SA11.27723</b>
	City <b>RANCHO CORDOVA</b> State <b>CA</b> Zip Code <b>95742-6521</b>	Amount of Each Receipt this Period <b>10000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SUNRISE MANUFACTURING, IN- C.</b>	Occupation <b>MANUFACTURER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>10000.00</b>	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MR. ROBERT MICHAEL SHANAHAN</b>	Date of Receipt MM / DD / YYYY <b>09 / 03 / 2010</b>
	Mailing Address <b>333 S. HOPE STREET FLOOR 53</b>	Transaction ID: <b>SA11.33573</b>
	City <b>LOS ANGELES</b> State <b>CA</b> Zip Code <b>90071-1418</b>	Amount of Each Receipt this Period <b>4800.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>CAPITAL GROUP, INC.</b>	Occupation <b>FINANCE</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>4800.00</b>	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MR. ROBERT SHAPIRO</b>	Date of Receipt MM / DD / YYYY <b>09 / 08 / 2010</b>
	Mailing Address <b>14225 VENTURA BLVD. SUITE 100</b>	Transaction ID: <b>SA11.36430</b>
	City <b>SHERMAN OAKS</b> State <b>CA</b> Zip Code <b>91423-2758</b>	Amount of Each Receipt this Period <b>2000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>WOODBRIIDGE STRUCTURED FUN- DING</b>	Occupation <b>PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2000.00</b>	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<b>16800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

15  
14  
13  
12  
11  
10  
9  
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7  
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2  
1

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 384 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MR. PAUL JOSEPH SHAUGHNESSY

Mailing Address 6349 ALEXANDER DRIVE

City State Zip Code  
CLAYTON MO 63105-2222

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
BSI CONSTRUCTORS, INC. CONTRACTOR

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 02 / 2010

Transaction ID: SA11.33508

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MR. TIMOTHY G. SHEEHAN

Mailing Address 691 MANRESA LANE

City State Zip Code  
LOS ALTOS CA 94022-4645

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
CYPRUS PROPERTY INC REAL ESTATE DEVELOPER

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 300.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2010

Transaction ID: SA11.30363

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MR. TED D. SHEELY

Mailing Address 555 PHILAN CIRCLE

City State Zip Code  
LEMOORE CA 93245-9697

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
SELF-EMPLOYED FARMER

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2010

Transaction ID: SA11.38762

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) .....

2300.00

TOTAL This Period (last page this line number only) .....

10020734747

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 385 / 582

(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)  
CARLY VICTORY COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
MR. MARVIN H. SHEPPARD

Mailing Address P.O. BOX 1148

City PALO ALTO State CA Zip Code 94302-1148

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation REALTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
09 / 22 / 2010

Transaction ID: SA11.45266

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. MARK SHEVITZ

Mailing Address 4180 CRESTA AVENUE

City SANTA BARBARA State CA Zip Code 93110-2408

FEC ID number of contributing federal political committee. C

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58966

Amount of Each Receipt this Period 250.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. BARRY J. SHILLITO

Mailing Address P.O. BOX 60705

City SAN DIEGO State CA Zip Code 92166-8705

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 ▼ 500.00

Date of Receipt MM / DD / YYYY  
09 / 13 / 2010

Transaction ID: SA11.39398

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1750.00

TOTAL This Period (last page this line number only) ..... ▶

10020734743

**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 386 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MS. JUNE SHILLMAN</b>	Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
	Mailing Address <b>P.O. BOX 676267</b>	Transaction ID: <b>SA11.58934</b>
	City <b>RANCHO SANTA FE</b> State <b>CA</b> Zip Code <b>92067-6267</b>	Amount of Each Receipt this Period <b>2000.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2000.00</b>	

<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MRS. MARSHA R. SIEGEL</b>	Date of Receipt MM / DD / YYYY <b>09 / 21 / 2010</b>
	Mailing Address <b>P.O. BOX 3913</b>	Transaction ID: <b>SA11.44132</b>
	City <b>RANCHO SANTA FE</b> State <b>CA</b> Zip Code <b>92067-3913</b>	Amount of Each Receipt this Period <b>500.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

<b>C.</b>	Full Name (Last, First, Middle Initial) <b>DR. MICHAEL E. SIEGEL</b>	Date of Receipt MM / DD / YYYY <b>09 / 21 / 2010</b>
	Mailing Address <b>P.O. BOX 3913</b>	Transaction ID: <b>SA11.44139</b>
	City <b>RANCHO SANTA FE</b> State <b>CA</b> Zip Code <b>92067-3913</b>	Amount of Each Receipt this Period <b>2400.00</b>
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>USC</b>	Occupation <b>PHYSICIAN</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734743

**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 387 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. RUSSELL SILBERSTEIN</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>13211 SEAGROVE STREET</b>	Transaction ID: <b>SA11.50781</b>
City <b>SAN DIEGO</b> State <b>CA</b> Zip Code <b>92130-3222</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>CARMEL CAPITAL PARTNERS</b> Occupation <b>INVESTMENT MANAGER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MS. LUANNE SILKWOOD</b>	Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
Mailing Address <b>P.O. BOX 22</b>	Transaction ID: <b>SA11.38711</b>
City <b>O' NEALS</b> State <b>CA</b> Zip Code <b>93645-0022</b>	Amount of Each Receipt this Period <b>1200.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>PONDEROSA TELEPHONE COMPAN- NY</b> Occupation <b>PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1200.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. STEVE SIMMONS</b>	Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>P.O. BOX 245</b>	Transaction ID: <b>SA11.50692</b>
City <b>MARION</b> State <b>IL</b> Zip Code <b>62959-0245</b>	Amount of Each Receipt this Period <b>300.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SPECIAL MINE SERVICES, IN- C.</b> Occupation <b>PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>300.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734750

**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 388 / 582
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. DONALD R. SIMMS

Mailing Address 4809 AU SABLE DRIVE

City GIBSONIA State PA Zip Code 15044-8349

FEC ID number of contributing federal political committee. **C**

Name of Employer UNITED MINING EQUIPMENT Occupation C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 09 / 27 / 2010

Transaction ID: SA11.49377

Amount of Each Receipt this Period 20000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. GARY SIMONS

Mailing Address 5811 ROUND MEADOW ROAD

City HIDDEN HILLS State CA Zip Code 91302-1287

FEC ID number of contributing federal political committee. **C**

Name of Employer UPSIDE INVESTMENTS, INC. Occupation COMMERCIAL REAL ESTATE DEVELOPER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 09 / 13 / 2010

Transaction ID: SA11.39363

Amount of Each Receipt this Period 3800.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MRS. GILENA SIMONS

Mailing Address 5811 ROUND MEADOW ROAD

City HIDDEN HILLS State CA Zip Code 91302-1287

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 ▼ 4800.00

Date of Receipt 09 / 15 / 2010

Transaction ID: SA11.40480

Amount of Each Receipt this Period 4800.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 28600.00

TOTAL This Period (last page this line number only) ..... ▶

10020734751



**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 389 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MRS. JOAN E. SIMON</b>	Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>3309 WORTHINGTON DRIVE</b>	Transaction ID: <b>SA11.29720</b>
City <b>MODESTO</b> State <b>CA</b> Zip Code <b>95350-1648</b>	Amount of Each Receipt this Period <b>2000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2500.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. JOAN E. SIMON</b>	Date of Receipt MM / DD / YYYY <b>09 / 24 / 2010</b>
Mailing Address <b>3309 WORTHINGTON DRIVE</b>	Transaction ID: <b>SA11.48300</b>
City <b>MODESTO</b> State <b>CA</b> Zip Code <b>95350-1648</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2500.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. PAUL WILLIAM SIMONSEN</b>	Date of Receipt MM / DD / YYYY <b>09 / 01 / 2010</b>
Mailing Address <b>P.O. BOX 1114</b>	Transaction ID: <b>SA11.30356</b>
City <b>PEBBLE BEACH</b> State <b>CA</b> Zip Code <b>93953-1114</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

SUBTOTAL of Receipts This Page (optional) .....	<b>3500.00</b>
TOTAL This Period (last page this line number only) .....	

10020734732

**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 390 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. RAYMOND C. SIMON</b>	Date of Receipt MM / DD / YYYY <b>09 / 24 / 2010</b>
Mailing Address <b>3309 WORTHINGTON DRIVE</b>	Transaction ID: <b>SA11.48309</b>
City <b>MODESTO</b> State <b>CA</b> Zip Code <b>95350-1648</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. REX A. SINQUEFIELD</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
Mailing Address <b>244 BENT WALNUT</b>	Transaction ID: <b>SA11.33515</b>
City <b>WESTPHALIA</b> State <b>MO</b> Zip Code <b>65085</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SHOW ME INSTITUTE</b> Occupation <b>PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. TOM G. SMART</b>	Date of Receipt MM / DD / YYYY <b>09 / 20 / 2010</b>
Mailing Address <b>8900 OAK VIEW DRIVE</b>	Transaction ID: <b>SA11.43607</b>
City <b>OAKDALE</b> State <b>CA</b> Zip Code <b>95361-9253</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>HERITAGE FORD</b> Occupation <b>AUTO DEALER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734733

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 391 / 582  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. VAL SMART

Mailing Address 8900 OAK VIEW DRIVE

City OAKDALE State CA Zip Code 95361-9253

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 ▼ 500.00

Date of Receipt 09 / 20 / 2010

Transaction ID: SA11.43599

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. STANLEY H. SMIEDT

Mailing Address 7855 LAJOLLA VISTA DRIVE

City LAJOLLA State CA Zip Code 92037-3531

FEC ID number of contributing federal political committee. **C**

Name of Employer J.S. FOODS Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 09 / 23 / 2010

Transaction ID: SA11.47378

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. BOYD CHARLES SMITH

Mailing Address 4 VISTA CIELO

City CARMEL State CA Zip Code 93923-9634

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 ▼ 2400.00

Date of Receipt 08 / 27 / 2010

Transaction ID: SA11.29536

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 5300.00

TOTAL This Period (last page this line number only) ..... ▶

10020734754

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 392 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. DEREK SMITH</b>		Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>	
Mailing Address <b>P.O. BOX 711606</b>		Transaction ID: <b>SA11.38918</b>	
City <b>SALT LAKE CITY</b>	State <b>UT</b>	Zip Code <b>84171-1606</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>OAKLEY NETWORKS</b>	Occupation <b>CEO</b>	Aggregate Year-to-Date <b>3400.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) <b>MR. DEREK SMITH</b>		Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>	
Mailing Address <b>P.O. BOX 711606</b>		Transaction ID: <b>SA11.38920</b>	
City <b>SALT LAKE CITY</b>	State <b>UT</b>	Zip Code <b>84171-1606</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>OAKLEY NETWORKS</b>	Occupation <b>CEO</b>	Aggregate Year-to-Date <b>3400.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) <b>MS. GENIE SMITH</b>		Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>	
Mailing Address <b>P.O. BOX 711606</b>		Transaction ID: <b>SA11.38919</b>	
City <b>SALT LAKE CITY</b>	State <b>UT</b>	Zip Code <b>84171-1606</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<b>CONTRIBUTION</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>ATTORNEY</b>	Aggregate Year-to-Date <b>2400.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734753

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 393 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. J. M. SMITH</b>		Date of Receipt MM / DD / YYYY <b>09 / 16 / 2010</b>
Mailing Address <b>P.O. BOX 243</b>		Transaction ID: <b>SA11.42759</b>
City <b>SUTTER</b>	State <b>CA</b>	Zip Code <b>95982-0243</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>M.H.M. INC.</b>	Occupation <b>CIVIL ENGINEER</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. JILL J. SMITH</b>		Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
Mailing Address <b>4 VISTA CIELO</b>		Transaction ID: <b>SA11.33526</b>
City <b>CARMEL</b>	State <b>CA</b>	Zip Code <b>93923-9634</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. KEN SMITH</b>		Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
Mailing Address <b>27711 DIAZ ROAD</b>		Transaction ID: <b>SA11.58731</b>
City <b>TEMECULA</b>	State <b>CA</b>	Zip Code <b>92590-3425</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>4000.00</b>
Name of Employer <b>SOUTHWEST TRADERS</b>	Occupation <b>C.E.O./OWNER</b>	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>4000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>7400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734756

**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 394 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. SHELDON M. SMITH</b>		Date of Receipt MM / DD / YYYY <b>09 / 20 / 2010</b>
Mailing Address <b>2716 A. SHERWOOD AVENUE</b>		Transaction ID: <b>SA11.43600</b>
City <b>MODESTO</b>	State <b>CA</b>	Zip Code <b>95350-2203</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. VICTOR SMITH</b>		Date of Receipt MM / DD / YYYY <b>08 / 26 / 2010</b>
Mailing Address <b>164 PEPPER AVENUE</b>		Transaction ID: <b>SA11.29481</b>
City <b>BURLINGAME</b>	State <b>CA</b>	Zip Code <b>94010-5248</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>CDS ENGINEERING</b>	Occupation <b>PRESIDENT</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. WALLACE E. SMITH</b>		Date of Receipt MM / DD / YYYY <b>09 / 22 / 2010</b>
Mailing Address <b>1135 WINDSOR AVENUE</b>		Transaction ID: <b>SA11.45223</b>
City <b>PIEDMONT</b>	State <b>CA</b>	Zip Code <b>94610-1048</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>CARROLL, BURDICK &amp; MCDONOUGH, L.L.P.</b>	Occupation <b>ATTORNEY</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734757

**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 395 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. LINDA SMITTCAMP

Mailing Address 10152 N. PEACH

City CLOVIS State CA Zip Code 93619-9193

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 ▼ 2400.00

Date of Receipt: 09 / 08 / 2010

Transaction ID: SA11.36365

Amount of Each Receipt this Period: 2400.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MRS. MARYBELLE SNOW

Mailing Address 1482 E. VALLEY ROAD #215

City MONTECITO State CA Zip Code 93108-1200

FEC ID number of contributing federal political committee. **C**

Name of Employer: SELF-EMPLOYED Occupation: SONG WRITER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt: 08 / 11 / 2010

Transaction ID: SA11.26313

Amount of Each Receipt this Period: 2400.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. ABRAHAM D. SOFAER

Mailing Address 1200 BRYANT STREET

City PALO ALTO State CA Zip Code 94301-2716

FEC ID number of contributing federal political committee. **C**

Name of Employer: STANFORD UNIVERSITY Occupation: SCHOLAR/ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 09 / 16 / 2010

Transaction ID: SA11.42637

Amount of Each Receipt this Period: 2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 6800.00

TOTAL This Period (last page this line number only) ..... ▶

1002071475

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 396 / 582
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. OTTO SORENSEN**

Mailing Address **2449 MARILOUISE WAY**

City **SAN DIEGO** State **CA** Zip Code **92103-1013**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE LAW OFFICE OF OTTO SORENSEN** Occupation **ATTORNEY**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2900.00**

Date of Receipt **09 / 21 / 2010**

Transaction ID: **SA11.44101**

Amount of Each Receipt this Period **2900.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**LUDRIE M. SOUZA**

Mailing Address **8555 S. VALENTINE AVENUE**

City **FRESNO** State **CA** Zip Code **93706-9169**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JOE SOUZA FARMS** Occupation **FARMER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 09 / 2010**

Transaction ID: **SA11.38718**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**MR. ROBERT J. SPARR**

Mailing Address **17 LINDA ISLE**

City **NEWPORT BEACH** State **CA** Zip Code **92660-7205**

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 ▼ **10000.00**

Date of Receipt **09 / 24 / 2010**

Transaction ID: **SA11.48340**

Amount of Each Receipt this Period **10000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **13900.00**

**TOTAL** This Period (last page this line number only) ..... ▶

10020734713



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 397 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) MRS. MAUREEN SPAULDING	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 1 FORDHAM	Transaction ID: SA11.58932
	City State Zip Code RANCHO MIRAGE CA 92270-3721	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
<b>B.</b>	Full Name (Last, First, Middle Initial) MR. RICHARD F. SPENCER	Date of Receipt MM / DD / YYYY 09 / 08 / 2010
	Mailing Address 5286 E. HOME AVENUE	Transaction ID: SA11.36366
	City State Zip Code FRESNO CA 93727-2103	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer SPENCER ENTERPRISES, INC.	Occupation BUSINESS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
<b>C.</b>	Full Name (Last, First, Middle Initial) MR. JAMES SPERING	Date of Receipt MM / DD / YYYY 09 / 24 / 2010
	Mailing Address 501 KINGS WAY	Transaction ID: SA11.48285
	City State Zip Code SUISUN CITY CA 94585-1844	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer SOCANO COUNTY	Occupation SUPERVISOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		10250.00
<b>TOTAL</b> This Period (last page this line number only) .....		

10020734740

**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 398 / 582
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. JACK SPIEGELMAN</b>	Date of Receipt MM / DD / YYYY <b>08 / 23 / 2010</b>
Mailing Address <b>9002 CEDAR RIDGE ROAD</b>	Transaction ID: <b>SA11.27725</b>
City <b>GRANITE BAY</b> State <b>CA</b> Zip Code <b>95746-7237</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>BUZZ OATES MANAGEMENT SERVICES</b> Occupation <b>ASSET MANAGER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MRS. ARLANA ST. CLAIR</b>	Date of Receipt MM / DD / YYYY <b>09 / 01 / 2010</b>
Mailing Address <b>3401 WIBLE ROAD</b>	Transaction ID: <b>SA11.30361</b>
City <b>BAKERSFIELD</b> State <b>CA</b> Zip Code <b>93309-6509</b>	Amount of Each Receipt this Period <b>2000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>REAL ESTATE INVESTMENTS</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2000.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. MARTIN JAY STADLER</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
Mailing Address <b>182 MIDLAND WAY</b>	Transaction ID: <b>SA11.33502</b>
City <b>DANVILLE</b> State <b>CA</b> Zip Code <b>94526-4841</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>S. &amp; M. MOVING SYSTEMS</b> Occupation <b>OWNER/PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734751

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 399 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MR. RANDALL L. STALNAKER  
Mailing Address RT 3 BOX 110

City State Zip Code  
CLARKSBURG WV 26301-9538

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
QUALITY HYDRAULICS INC. PRESIDENT

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2010

Transaction ID: SA11.49382

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MRS. KATHY STANLEY  
Mailing Address 77-745 N. VIA VILLAGGIO

City State Zip Code  
INDIAN WELLS CA 92210-6145

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 ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 02 / 2010

Transaction ID: SA11.33509

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MRS. CRIS STARRH  
Mailing Address 1280 N. POPLAR AVENUE

City State Zip Code  
SHAFTER CA 93263-9403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED FARMER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2010

Transaction ID: SA11.28206

Amount of Each Receipt this Period  
1250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2500.00  
TOTAL This Period (last page this line number only) ..... ▶

10020734752

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 400 / 582

(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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. FRED STARRH Mailing Address P.O. BOX 1536 City State Zip Code <b>SHAFTER CA 93263-1536</b> FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YY</td> </tr> <tr> <td>08</td> <td>24</td> <td>2010</td> </tr> </table> Transaction ID: SA11.28199 Amount of Each Receipt this Period <table border="1"> <tr> <td>1250.00</td> </tr> </table> CONTRIBUTION	MM	DD	YY	08	24	2010	1250.00
MM	DD	YY							
08	24	2010							
1250.00									
Name of Employer Occupation SELF-EMPLOYED FARMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>1250.00</td> </tr> </table>		1250.00							
1250.00									
<b>B.</b> Full Name (Last, First, Middle Initial) MRS. SHANA STARRH Mailing Address 29929 FRESNO AVENUE City State Zip Code <b>SHAFTER CA 93263-9591</b> FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YY</td> </tr> <tr> <td>08</td> <td>24</td> <td>2010</td> </tr> </table> Transaction ID: SA11.28205 Amount of Each Receipt this Period <table border="1"> <tr> <td>1250.00</td> </tr> </table> CONTRIBUTION	MM	DD	YY	08	24	2010	1250.00
MM	DD	YY							
08	24	2010							
1250.00									
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 ▼ <table border="1"> <tr> <td>1250.00</td> </tr> </table>		1250.00							
1250.00									
<b>C.</b> Full Name (Last, First, Middle Initial) MR. GLENN STEARNS Mailing Address 12 FAIRWAY POINT City State Zip Code <b>NEWPORT COAST CA 92657-1721</b> FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YY</td> </tr> <tr> <td>08</td> <td>23</td> <td>2010</td> </tr> </table> Transaction ID: SA11.27711 Amount of Each Receipt this Period <table border="1"> <tr> <td>30400.00</td> </tr> </table> CONTRIBUTION	MM	DD	YY	08	23	2010	30400.00
MM	DD	YY							
08	23	2010							
30400.00									
Name of Employer Occupation STEARNS LENDING, INC. MORTGAGE LENDER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>30400.00</td> </tr> </table>		30400.00							
30400.00									
SUBTOTAL of Receipts This Page (optional) ..... ▶		<table border="1"> <tr> <td>32900.00</td> </tr> </table>	32900.00						
32900.00									
TOTAL This Period (last page this line number only) ..... ▶		<table border="1"> <tr> <td></td> </tr> </table>							

10020734723

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 401 / 582 (check only one)
<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. DAVID STECKLER

Mailing Address 50 IDLEWOOD ROAD

City KENTFIELD State CA Zip Code 94904-2753

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 09 / 20 / 2010

Transaction ID: SA11.43561

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. DAVID STECKLER

Mailing Address 50 IDLEWOOD ROAD

City KENTFIELD State CA Zip Code 94904-2753

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 09 / 29 / 2010

Transaction ID: SA11.50842

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MRS. DOROTHY STECKLER

Mailing Address 50 IDLEWOOD ROAD

City KENTFIELD State CA Zip Code 94904-2753

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 ▼ 500.00

Date of Receipt 09 / 29 / 2010

Transaction ID: SA11.50868

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2000.00

TOTAL This Period (last page this line number only) ..... ▶

1002073475

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 402 / 582

(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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MS. DANIELLE STEEL

Mailing Address 2280 OCTAVIA STREET

City State Zip Code  
SAN FRANCISCO CA 94109-2800

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
SELF-EMPLOYED AUTHOR

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 27 / 2010

Transaction ID: SA11.29543

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MR. ADAM B. STERN

Mailing Address 140 HOOK ROAD

City State Zip Code  
BEDFORD NY 10506-1113

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
A.M. INVESTMENT BUSINESS

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36409

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MRS. ERIKA ARONSON STERN

Mailing Address 140 HOOK ROAD

City State Zip Code  
BEDFORD NY 10506-1113

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 2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36387

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 9800.00

TOTAL This Period (last page this line number only)

10020734765

**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 403 / 582
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>MS. EVA S. STERN</b>		Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>23700 MALIBU COLONY ROAD</b>		Transaction ID: <b>SA11.39346</b>
City <b>MALIBU</b>	State <b>CA</b>	Zip Code <b>90265-6629</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>20500.00</b>
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>20500.00</b>	

B. Full Name (Last, First, Middle Initial) <b>MR. MARC I. STERN</b>		Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>23700 MALIBU COLONY ROAD</b>		Transaction ID: <b>SA11.29706</b>
City <b>MALIBU</b>	State <b>CA</b>	Zip Code <b>90265-6629</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>10300.00</b>
Name of Employer <b>THE TCW GROUP, INC.</b>	Occupation <b>VICE CHAIRMAN/C.E.O.</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>10300.00</b>	

C. Full Name (Last, First, Middle Initial) <b>MR. MARK A. STEVENS</b>		Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
Mailing Address <b>85 QUEENS COURT</b>		Transaction ID: <b>SA11.49412</b>
City <b>ATHERTON</b>	State <b>CA</b>	Zip Code <b>94027-5409</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2500.00</b>
Name of Employer <b>SEQUOIA CAPITAL</b>	Occupation <b>VENTURE CAPITALIST</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>33300.00</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 404 / 582  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
MRS. MARY V. STEVENS

Mailing Address 85 QUEENS COURT

City State Zip Code  
ATHERTON CA 94027-5409

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS  
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2010

Transaction ID: SA11.49481

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. DAVID L. STEWARD

Mailing Address 309 WYNDMOOR TERRACE COURT

City State Zip Code  
TOWN AND COUNTRY MO 63141-8021

FEC ID number of contributing federal political committee. **C**

Name of Employer WORLD WIDE TECHNOLOGY  
Occupation CHAIRMAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

Transaction ID: SA11.38948

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MRS. THELMA STEWART

Mailing Address 1067 BRISTOL AVENUE

City State Zip Code  
STOCKTON CA 95204-3005

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 ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 20 / 2010

Transaction ID: SA11.43574

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 5000.00

TOTAL This Period (last page this line number only) ..... ▶

10020734767



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 405 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. EDWARD SMITH STIKER		Date of Receipt MM / DD / YYYY 09 / 22 / 2010	
Mailing Address 50 CENTRAL PARK W. APARTMENT 4C		Transaction ID: SA11.45251	
City NEW YORK State NY Zip Code 10023-6006	Amount of Each Receipt this Period 7500.00		
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer MORGAN STANLEY Occupation FIXED INCOME SALES	Aggregate Year-to-Date 7500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
<b>B.</b> Full Name (Last, First, Middle Initial) MRS. STEPHANIE L. STIKER		Date of Receipt MM / DD / YYYY 09 / 22 / 2010	
Mailing Address 50 CENTRAL PARK W. APARTMENT 4C		Transaction ID: SA11.45246	
City NEW YORK State NY Zip Code 10023-6006	Amount of Each Receipt this Period 7500.00		
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer HOMEMAKER Occupation HOMEMAKER	Aggregate Year-to-Date 7500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
<b>C.</b> Full Name (Last, First, Middle Initial) MR. ROBERT A. STINE		Date of Receipt MM / DD / YYYY 08 / 23 / 2010	
Mailing Address P.O. BOX 10357		Transaction ID: SA11.27721	
City BAKERSFIELD State CA Zip Code 93389-0357	Amount of Each Receipt this Period 2400.00		
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer TEJON RANCH COMPANY Occupation PRESIDENT	Aggregate Year-to-Date 2400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
SUBTOTAL of Receipts This Page (optional) .....		17400.00	
TOTAL This Period (last page this line number only) .....			

1002073476



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 407 / 582

(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)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. THOMAS B. STOUGHTON	Date of Receipt MM / DD / YYYY 09 / 27 / 2010
	Mailing Address 5298 ASHLEY TRACE	Transaction ID: SA11.49386
	City ATLANTA State GA Zip Code 30360-1200	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer STRATEGIC PRINTING SOLUTIONS Occupation PRINCIPAL	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date 1000.00
B.	Full Name (Last, First, Middle Initial) MR. GREGORY R. STUBBLEFIELD	Date of Receipt MM / DD / YYYY 09 / 17 / 2010
	Mailing Address 5 HUNTLEIGH WOODS	Transaction ID: SA11.43485
	City ST. LOUIS State MO Zip Code 63131-4818	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer ENTERPRISE HOLDINGS, INC. Occupation EXECUTIVE VICE PRESIDENT	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date 2400.00
C.	Full Name (Last, First, Middle Initial) MR. CHARLES M. SUBLETT	Date of Receipt MM / DD / YYYY 09 / 02 / 2010
	Mailing Address 320 S. BOSTON SUITE 1020	Transaction ID: SA11.33510
	City TULSA State OK Zip Code 74103-3703	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation ATTORNEY	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date 1000.00
SUBTOTAL of Receipts This Page (optional) .....		4400.00
TOTAL This Period (last page this line number only) .....		

10020734770

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 408 / 582

(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. THOMAS W. SUDBERRY, JR.</b>		Date of Receipt MM / DD / YYYY <b>08 / 24 / 2010</b>
Mailing Address <b>5465 MOREHOUSE DRIVE SUITE 260</b>		Transaction ID: <b>SA11.28196</b>
City <b>SAN DIEGO</b>	State <b>CA</b>	Zip Code <b>92121-4714</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>10000.00</b>
Name of Employer <b>SUDBERRY PROPERTIES</b>	Occupation <b>CHAIRMAN</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>10000.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. BURT SUGARMAN</b>		Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>
Mailing Address <b>9440 SANTA MONICA BLVD.</b>		Transaction ID: <b>SA11.27666</b>
City <b>BEVERLY HILLS</b>	State <b>CA</b>	Zip Code <b>90210-4610</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>GIANT GROUP, LTD.</b>	Occupation <b>CHAIRMAN</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>22400.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. BURT SUGARMAN</b>		Date of Receipt MM / DD / YYYY <b>09 / 22 / 2010</b>
Mailing Address <b>9440 SANTA MONICA BLVD.</b>		Transaction ID: <b>SA11.45236</b>
City <b>BEVERLY HILLS</b>	State <b>CA</b>	Zip Code <b>90210-4610</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>20000.00</b>
Name of Employer <b>GIANT GROUP, LTD.</b>	Occupation <b>CHAIRMAN</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>22400.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>32400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734771

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 409 / 582
(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. MARY H. SUGARMAN Mailing Address 9440 SANTA MONICA BLVD. SUITE 407 City State Zip Code BEVERLY HILLS CA 90210-4607 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt
	M M M / D D D / Y Y Y Y Y Y Y 08 / 19 / 2010 Transaction ID: SA11.27672
	Amount of Each Receipt this Period 2400.00 CONTRIBUTION
	Name of Employer Occupation PARAMOUNT TELEVISION TV ANCHOR
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.00

<b>B.</b> Full Name (Last, First, Middle Initial) MRS. MARTHA S. SUMMA Mailing Address 250 BRENTWOOD ROAD City State Zip Code HILLSBOROUGH CA 94010-7002 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt
	M M M / D D D / Y Y Y Y Y Y Y 08 / 26 / 2010 Transaction ID: SA11.29483
	Amount of Each Receipt this Period 250.00 CONTRIBUTION
	Name of Employer Occupation SUMMA AND ASSOCIATES PRESIDENT
	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) MR. RICHARD E. SWANSON Mailing Address 2606 N. QUINCY ROAD City State Zip Code TURLOCK CA 95382-9107 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt
	M M M / D D D / Y Y Y Y Y Y Y 09 / 23 / 2010 Transaction ID: SA11.45492
	Amount of Each Receipt this Period 5000.00 CONTRIBUTION
	Name of Employer Occupation SWANSON FARMS FARMER
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

SUBTOTAL of Receipts This Page (optional) .....	7650.00
TOTAL This Period (last page this line number only) .....	

10020734772

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 410 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. RICHARD E. SWANSON	Date of Receipt MM / DD / YYYY 09 / 23 / 2010
	Mailing Address 2606 N. QUINCY ROAD	Transaction ID: SA11.45493
	City State Zip Code TURLOCK CA 95382-9107	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer SWANSON FARMS	Occupation FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	
<b>B.</b>	Full Name (Last, First, Middle Initial) DR. CHARLES S. SYERS	Date of Receipt MM / DD / YYYY 08 / 26 / 2010
	Mailing Address P.O. BOX 1879	Transaction ID: SA11.29484
	City State Zip Code SAN MATEO CA 94401-0946	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer SELF-EMPLOYED	Occupation DENTIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5500.00	
<b>C.</b>	Full Name (Last, First, Middle Initial) DR. CHARLES S. SYERS	Date of Receipt MM / DD / YYYY 09 / 08 / 2010
	Mailing Address P.O. BOX 1879	Transaction ID: SA11.36423
	City State Zip Code SAN MATEO CA 94401-0946	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer SELF-EMPLOYED	Occupation DENTIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5500.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		10500.00
<b>TOTAL</b> This Period (last page this line number only) .....		

1002074474

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 411 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) MRS. LISA P. SYMONS	Date of Receipt MM / DD / YYYY 09 / 22 / 2010
	Mailing Address 1080 HEARST DRIVE	Transaction ID: SA11.45267
	City State Zip Code PLEASANTON CA 94566-7530	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer N/A	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
<b>B.</b>	Full Name (Last, First, Middle Initial) DR. H. MICHAEL SYNN	Date of Receipt MM / DD / YYYY 09 / 29 / 2010
	Mailing Address 722 MEDICAL CENTER DRIVE EAST SUITE 105	Transaction ID: SA11.50754
	City State Zip Code CLOVIS CA 93611-6810	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer SELF-EMPLOYED	Occupation DOCTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>C.</b>	Full Name (Last, First, Middle Initial) MR. JOHN A. TAGG	Date of Receipt MM / DD / YYYY 09 / 02 / 2010
	Mailing Address P.O. BOX 754	Transaction ID: SA11.33527
	City State Zip Code PEBBLE BEACH CA 93953-0754	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		2000.00
<b>TOTAL</b> This Period (last page this line number only) .....		

1002073474

**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 412 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. HAMLIN TALLENT**

Mailing Address **10339 TIOGA DRIVE**

City **ESCONDIDO** State **CA** Zip Code **92029**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SENTEL GLOBAL** Occupation **DEFENSE CONTRACTOR**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 15 / 2010**

Transaction ID: **SA11.40454**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. LARRY TASHJIAN**

Mailing Address **300 N. LAKE AVENUE**

City **PASADENA** State **CA** Zip Code **91101-4109**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CAM CAPITAL ADVISORS** Occupation **INVESTMENTS**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 22 / 2010**

Transaction ID: **SA11.45242**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MS. NAOMA TATE**

Mailing Address **153 HIDDEN VALLEY ROAD**

City **CODY** State **WY** Zip Code **82414-8893**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BIG HAT RANCH** Occupation **HOMEMAKER**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **10000.00**

Date of Receipt **09 / 09 / 2010**

Transaction ID: **SA11.38763**

Amount of Each Receipt this Period **10000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **11000.00**

**TOTAL** This Period (last page this line number only) ..... ▶

10020734773



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 413 / 582
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. TAD TAUBE

Mailing Address 1050 RALSTON AVENUE

City BELMONT State CA Zip Code 94002-2240

FEC ID number of contributing federal political committee. **C**

Name of Employer TAUBE INVESTMENTS Occupation CHAIRMAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 22 / 2010

Transaction ID: SA11.45254

Amount of Each Receipt this Period 10000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MRS. BARBARA B. TAYLOR

Mailing Address 1147 LOG CABIN LANE

City ST. LOUIS State MO Zip Code 63124-1519

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation COMMUNITY VOLUNTEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 09 / 08 / 2010

Transaction ID: SA11.36388

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. GEORGE TAYLOR

Mailing Address 476 BORDER HILL ROAD

City LOS ALTOS State CA Zip Code 94024-4729

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 ▼ 500.00

Date of Receipt 09 / 13 / 2010

Transaction ID: SA11.39406

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 12900.00

TOTAL This Period (last page this line number only) ..... ▶

10020714776

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 414 / 582

(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

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MR. JACK C. TAYLOR

Mailing Address 35 HUNT AVENUE

City State Zip Code  
SAINT LOUIS MO 63124-2008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
ENTERPRISE HOLDINGS FOUNDER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

Transaction ID: SA11.47343

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MRS. JOANNE TAYLOR-JOHNSON

Mailing Address 70 ROBLEY ROAD

City State Zip Code  
SALINAS CA 93908-8900

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 ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
08 / 30 / 2010

Transaction ID: SA11.29654

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
PROF. JOHN B. TAYLOR

Mailing Address 576 GERONA ROAD

City State Zip Code  
STANFORD CA 94305-8449

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
STANFORD PROFESSOR

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 13 / 2010

Transaction ID: SA11.39404

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 6800.00

TOTAL This Period (last page this line number only) ..... ▶

10020734777

**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 415 / 582
<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. MARILEE O. TAYLOR**

Mailing Address **476 BORDER HILL ROAD**

City **LOS ALTOS** State **CA** Zip Code **94024-4729**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 13 / 2010**

Transaction ID: **SA11.39416**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. HENRY TE VELDE**

Mailing Address **13640 COLLIER ROAD**

City **DELHI** State **CA** Zip Code **95315-9611**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **DAIRYMAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 13 / 2010**

Transaction ID: **SA11.39413**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. DAVID TEASLEY**

Mailing Address **137 ROGER SMITH**

City **LINDON** State **VA** Zip Code **23185-8229**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PRINCIPAL**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 09 / 2010**

Transaction ID: **SA11.38734**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2000.00**

**TOTAL** This Period (last page this line number only) ..... ▶

10020734778

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 416 / 582
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. MICHAEL J. TEDESCO

Mailing Address 1012 COLLEGE AVENUE

City State Zip Code  
**MENLO PARK CA 94025-5210**

FEC ID number of contributing federal political committee. **C**

Name of Employer  
CITI Occupation  
INVESTMENT BANKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt  
MM / DD / YYYY  
08 / 26 / 2010

Transaction ID: SA11.29475

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. ROBERT TEITSWORTH

Mailing Address 32061 COOK LANE

City State Zip Code  
**SAN JUAN CAPISTRAN CA 92675-3954**

FEC ID number of contributing federal political committee. **C**

Name of Employer  
SELF-EMPLOYED Occupation  
INVESTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

Transaction ID: SA11.47336

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. TOM TEIXEIRA

Mailing Address 9715 W. DENTON AND LEAKE ROAD

City State Zip Code  
**DOS PALOS CA 93620**

FEC ID number of contributing federal political committee. **C**

Name of Employer  
SELF-EMPLOYED Occupation  
FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2010

Transaction ID: SA11.30358

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3400.00**

**TOTAL** This Period (last page this line number only) ..... ▶

10020734779

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 417 / 582

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MRS. AUDREY TENNIS

Mailing Address 806 WESTGATE COURT

City State Zip Code  
CHICO CA 95926-7146

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
SELF-EMPLOYED FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

MM / DD / YYYY  
09 / 09 / 2010

Transaction ID: SA11.38674

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
MR. LANCE D. TENNIS

Mailing Address 806 WESTGATE COURT

City State Zip Code  
CHICO CA 95926-7146

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
SELF-EMPLOYED FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

MM / DD / YYYY  
09 / 09 / 2010

Transaction ID: SA11.38697

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
MRS. SUSAN JEAN TERRILL

Mailing Address 3000F DANVILLE BLVD. #337

City State Zip Code  
ALAMO CA 94507-1538

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 ▼  
500.00

Date of Receipt

MM / DD / YYYY  
09 / 16 / 2010

Transaction ID: SA11.42639

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

1000.00

TOTAL This Period (last page this line number only) ▶

1002073470

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 418 / 582
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. THOMAS W. TERRILL

Mailing Address 3000F DANVILLE BLVD. #337

City ALAMO State CA Zip Code 94507-1538

FEC ID number of contributing federal political committee. **C**

Name of Employer THE TERRILL COMPANY Occupation REAL ESTATE DEVELOPEMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 16 / 2010

Transaction ID: SA11.42644

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. ROBERT S. THESMAN

Mailing Address 246 FIRST STREET

City SAN FRANCISCO State CA Zip Code 94105-2636

FEC ID number of contributing federal political committee. **C**

Name of Employer NOVOGRADAC & COMPANY, LLP Occupation CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 09 / 29 / 2010

Transaction ID: SA11.50782

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. DAVID THOMAS

Mailing Address 10786 N. EAGLE CREST LANE

City FRESNO State CA Zip Code 93730-3594

FEC ID number of contributing federal political committee. **C**

Name of Employer ROYAL T MANAGEMENT Occupation REAL ESTATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 13 / 2010

Transaction ID: SA11.39359

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3900.00

TOTAL This Period (last page this line number only) ..... ▶

10020734781

**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 419 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
DR. DAVID A. THOMAS

Mailing Address 112 PARK CREST

City State Zip Code  
NEWPORT COAST CA 92657-1042

FEC ID number of contributing federal political committee. **C**

Name of Employer: DAVID A. THOMAS, M.D., IN-C. Occupation: EMERGENCY PHYSICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 31 / 2010

Transaction ID: SA11.29705

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. JAMES A. THOMAS

Mailing Address 515 S. FLOWER STREET  
6TH FLOOR

City State Zip Code  
LOS ANGELES CA 90071-2201

FEC ID number of contributing federal political committee. **C**

Name of Employer: THOMAS PROPERTIES GROUP Occupation: PRESIDENT & C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4800.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58967

Amount of Each Receipt this Period  
4800.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MRS. JANICE THOMAS

Mailing Address 4097 VIA PALO VERDE LAGO

City State Zip Code  
ALPINE CA 91901-3219

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 ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 17 / 2010

Transaction ID: SA11.43481

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ **10050.00**

TOTAL This Period (last page this line number only) ..... ▶

10020734732

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 420 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT THOMAS**

Mailing Address **4097 VIA PALO VERDE LAGO**

City **ALPINE** State **CA** Zip Code **91901-3219**

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 ▼ **5000.00**

Date of Receipt **09 / 17 / 2010**

Transaction ID: **SA11.43486**

Amount of Each Receipt this Period **5000.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. CAROL A. THOMPSON**

Mailing Address **113 BELLE LANE**

City **PLEASANT HILL** State **CA** Zip Code **94523-4641**

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 ▼ **250.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50777**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN SID THOMPSON**

Mailing Address **113 BELLE LANE**

City **PLEASANT HILL** State **CA** Zip Code **94523-4641**

FEC ID number of contributing federal political committee. **C**

Name of Employer **J. T. ENTERPRISE** Occupation **OWNER**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50788**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5500.00**

**TOTAL** This Period (last page this line number only) ..... ▶

10020734783



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 421 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. TIM THOMSON Mailing Address 19405 WILDWOOD ROAD City <b>BUTTONWILLOW</b> State <b>CA</b> Zip Code <b>93206-9548</b> FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY <b>09 / 03 / 2010</b> Transaction ID: SA11.33593 Amount of Each Receipt this Period <b>500.00</b> <b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>FARMER</b> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>500.00</b>		
<b>B.</b> Full Name (Last, First, Middle Initial) MR. RUSSELL THURMAN Mailing Address 16348 RIO VISTA ROAD City <b>SAN DIEGO</b> State <b>CA</b> Zip Code <b>92127-5721</b> FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b> Transaction ID: SA11.27583 Amount of Each Receipt this Period <b>4800.00</b> <b>CONTRIBUTION</b>
Name of Employer <b>GOULD ELECTRIC, INC.</b> Occupation <b>MANAGEMENT</b> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>4800.00</b>		
<b>C.</b> Full Name (Last, First, Middle Initial) MR. JOSEPH O. TOBIN, II Mailing Address 2108 WASHINGTON STREET City <b>SAN FRANCISCO</b> State <b>CA</b> Zip Code <b>94109-2845</b> FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY <b>09 / 17 / 2010</b> Transaction ID: SA11.43479 Amount of Each Receipt this Period <b>1000.00</b> <b>CONTRIBUTION</b>
Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>INVESTOR</b> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>1000.00</b>		
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		<b>6300.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

10020734733

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 422 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. BRETT A. TODD Mailing Address 948 E. CHELSEA DRIVE City FRESNO State CA Zip Code 93720-1359 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2010 Transaction ID: SA11.39409 Amount of Each Receipt this Period 500.00 CONTRIBUTION
Name of Employer ENTERPRISE HOLDINGS Occupation RVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) MR. DAVID M. TOFOLO Mailing Address 4361 BIRCH City NEWPORT BEACH State CA Zip Code 92660-1910 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2010 Transaction ID: SA11.40325 Amount of Each Receipt this Period 1200.00 CONTRIBUTION
Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00		
<b>C.</b> Full Name (Last, First, Middle Initial) MR. JOSEPH R. TOMKINSON Mailing Address 19500 JAMBOREE ROAD City IRVINE State CA Zip Code 92612-2401 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2010 Transaction ID: SA11.58740 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
Name of Employer IMPAC HOLDINGS Occupation C.E.O. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		
SUBTOTAL of Receipts This Page (optional) ..... ▶		2700.00
TOTAL This Period (last page this line number only) ..... ▶		

10020734788

**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 423 / 582
<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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. DAVID W. TOMLINSON Mailing Address 21796 AVENUE 304 City EXETER State CA Zip Code 93221-9753 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 09 / 2010 Transaction ID: SA11.38764 Amount of Each Receipt this Period 250.00 CONTRIBUTION
	Name of Employer: GRIFFITH FARMS Occupation: GENERAL MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 250.00

<b>B.</b> Full Name (Last, First, Middle Initial) MR. MICHAEL TOMLINSON Mailing Address 1007 LIVE OAK BLVD. SUITE A4 City YUBA CITY State CA Zip Code 95991-3454 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 17 / 2010 Transaction ID: SA11.43501 Amount of Each Receipt this Period 250.00 CONTRIBUTION
	Name of Employer: SELF-EMPLOYED Occupation: BUSINESSMAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 500.00

<b>C.</b> Full Name (Last, First, Middle Initial) MR. MICHAEL TOMLINSON Mailing Address 1007 LIVE OAK BLVD. SUITE A4 City YUBA CITY State CA Zip Code 95991-3454 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2010 Transaction ID: SA11.50755 Amount of Each Receipt this Period 250.00 CONTRIBUTION
	Name of Employer: SELF-EMPLOYED Occupation: BUSINESSMAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 500.00

SUBTOTAL of Receipts This Page (optional) .....	750.00
TOTAL This Period (last page this line number only) .....	

10020734788

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 424 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. NANCY B. TOMLINSON Mailing Address 21796 AVENUE 304 City EXETER State CA Zip Code 93221-9753 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 09 / 2010 Transaction ID: SA11.38760 Amount of Each Receipt this Period 250.00 <b>CONTRIBUTION</b>	
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 250.00	
	<b>B.</b> Full Name (Last, First, Middle Initial) MRS. THERESA TOMLINSON Mailing Address 1007 LIVE OAK BLVD. SUITE A4 City YUBA CITY State CA Zip Code 95991-3454 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 17 / 2010 Transaction ID: SA11.43499 Amount of Each Receipt this Period 250.00 <b>CONTRIBUTION</b>
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS 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) MR. JOHN T. TORREY Mailing Address 221 WEST POPLAR AVENUE City SAN MATEO State CA Zip Code 94402-1153 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 08 / 26 / 2010 Transaction ID: SA11.29407 Amount of Each Receipt this Period 250.00 <b>CONTRIBUTION</b>	
	Name of Employer CONCUR TECHNOLOGIES, INC. Occupation SOFTWARE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 250.00	
	SUBTOTAL of Receipts This Page (optional) ..... ▶ 750.00	
	TOTAL This Period (last page this line number only) ..... ▶	

10020734787

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 425 / 582
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) MR. WILLIAM TOS, JR.		Date of Receipt MM / DD / YYYY 09 / 08 / 2010
Mailing Address 8605 EXCELSIOR AVENUE		Transaction ID: SA11.36373
City HANFORD	State CA	Zip Code 93230-9784
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer TOS FARMS, INC.	Occupation AGRI-BUSINESS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) MR. TREVOR TRAINA		Date of Receipt MM / DD / YYYY 09 / 13 / 2010
Mailing Address 2825 BROADWAY		Transaction ID: SA11.39407
City SAN FRANCISCO	State CA	Zip Code 94115-1060
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer DRIVER SIDE	Occupation EXECUTIVE	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**C.**

Full Name (Last, First, Middle Initial) GNEAL TREVETHAN		Date of Receipt MM / DD / YYYY 09 / 27 / 2010
Mailing Address 2985 CATLETT ROAD		Transaction ID: SA11.49278
City PLEASANT GROVE	State CA	Zip Code 95668-9741
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer SELF - TREVETHAN FARMS	Occupation FARMER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	2000.00
TOTAL This Period (last page this line number only) .....	

1002073478

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 426 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. TROY R. TRIBE Mailing Address 66 N. 900 E. City LINDON State UT Zip Code 84042-2208 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 09 / 2010 Transaction ID: SA11.38733 Amount of Each Receipt this Period 1000.00 <b>CONTRIBUTION</b>	
	Name of Employer SOLEIRA NETWORKS Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) MR. GARY D. TRUMP Mailing Address 67748 TULANE ROAD City ST. CLAIRSVILLE State OH Zip Code 43950-8724 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 29 / 2010 Transaction ID: SA11.50704 Amount of Each Receipt this Period 300.00 <b>CONTRIBUTION</b>
	Name of Employer AMERICAN ENERGY CORP Occupation MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MR. BRUCE E. TUBAUGH Mailing Address 2351 STONEWALL CEMETERY ROAD City LANCASTER State OH Zip Code 43130-9785 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 27 / 2010 Transaction ID: SA11.49394 Amount of Each Receipt this Period 500.00 <b>CONTRIBUTION</b>	
	Name of Employer TUBAUGH REMODELING L.L.C. Occupation SELF-EMPLOYED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) ..... ▶	1800.00
	TOTAL This Period (last page this line number only) ..... ▶	[ ]

10020734789

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 427 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. JEFF S. TUCKER</b>		Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
Mailing Address <b>255 E. PACES FERRY ROAD SUITE 450</b>		Transaction ID: <b>SA11.49395</b>
City <b>ATLANTA</b>	State <b>GA</b>	Zip Code <b>30305-2267</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>J. TUCKER DEVELOPMENT PARTNERS</b>		CONTRIBUTION
Occupation <b>OWNER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. THOMAS TUCKER</b>		Date of Receipt MM / DD / YYYY <b>08 / 16 / 2010</b>
Mailing Address <b>3 UPPER NEWPORT PLAZA DRIVE</b>		Transaction ID: <b>SA11.26321</b>
City <b>NEWPORT BEACH</b>	State <b>CA</b>	Zip Code <b>92660</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>PENNHILL PROPERTIES</b>		CONTRIBUTION
Occupation <b>CHAIRMAN</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. LYLE TULLIS</b>		Date of Receipt MM / DD / YYYY <b>09 / 20 / 2010</b>
Mailing Address <b>BOX 493416</b>		Transaction ID: <b>SA11.43563</b>
City <b>REDDING</b>	State <b>CA</b>	Zip Code <b>96049-3416</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>TULLIS INC.</b>		CONTRIBUTION
Occupation <b>CONTRACTOR</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734790

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 428 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. GREGORY P. TURNER Mailing Address 155 YALE LANE City SEAL BEACH State CA Zip Code 90740-2521 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 08 / 27 / 2010 Transaction ID: SA11.29534 Amount of Each Receipt this Period 1500.00 CONTRIBUTION	
	Name of Employer Occupation GREG TURNER PAINTING PAINTING CONTRACTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00	
	<b>B.</b> Full Name (Last, First, Middle Initial) MR. GREGORY P. TURNER Mailing Address 155 YALE LANE City SEAL BEACH State CA Zip Code 90740-2521 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 02 / 2010 Transaction ID: SA11.35227A Amount of Each Receipt this Period 1500.00 CONTRIBUTION CHARGED BACK \$1,500.00 ON 09/07/2010
	Name of Employer Occupation GREG TURNER PAINTING PAINTING CONTRACTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MR. GREGORY P. TURNER Mailing Address 155 YALE LANE City SEAL BEACH State CA Zip Code 90740-2521 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 07 / 2010 Transaction ID: SA11.35227B Amount of Each Receipt this Period -1500.00 CONTRIBUTION CHARGED BACK	
Name of Employer Occupation GREG TURNER PAINTING PAINTING CONTRACTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		
SUBTOTAL of Receipts This Page (optional) ..... ▶ 1500.00		
TOTAL This Period (last page this line number only) ..... ▶		

10020734791



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 429 / 582

(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)

CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. RYAN TURNER Mailing Address 4389 N. VAN NESS BLVD. City State Zip Code FRESNO CA 93704-3723 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 09 / 2010 Transaction ID: SA11.38717 Amount of Each Receipt this Period 500.00 CONTRIBUTION	
	Name of Employer Occupation 6TH STREET INVESTMENTS FUND MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) MRS. WENDY L. TURNER Mailing Address 4389 N. VAN NESS BLVD. City State Zip Code FRESNO CA 93704-3723 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 09 / 2010 Transaction ID: SA11.38745 Amount of Each Receipt this Period 500.00 CONTRIBUTION
	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 ▼ 500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MR. CARL UELAND Mailing Address 7529 W. SHAW AVENUE City State Zip Code FRESNO CA 93723-9411 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 01 / 2010 Transaction ID: SA11.30357 Amount of Each Receipt this Period 500.00 CONTRIBUTION	
	Name of Employer Occupation ACTAGRO, L.L.C. GENERAL MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) ..... ▶ 1500.00	
	TOTAL This Period (last page this line number only) ..... ▶	

10020734792

**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 430 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. ANTHONY J. UJDUR

Mailing Address 2122 DUNBLANE COURT

City State Zip Code  
WALNUT CREEK CA 94598-3325

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 ▼ 1000.00

Date of Receipt MM / DD / YYYY  
09 / 23 / 2010

Transaction ID: SA11.47369

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. SCOTT VACCARD

Mailing Address 2494 DIABLO RANCH PLACE

City State Zip Code  
DANVILLE CA 94506-2071

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
ENTERPRISE HOLDINGS VICE PRESIDENT OF DAILY RENTAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
08 / 30 / 2010

Transaction ID: SA11.29656

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. DONALD T. VALENTINE

Mailing Address 265 GREER ROAD

City State Zip Code  
WOODSIDE CA 94062-4205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SEQUOIA CAPITAL VENTURE CAPITAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 9600.00

Date of Receipt MM / DD / YYYY  
09 / 07 / 2010

Transaction ID: SA11.35515

Amount of Each Receipt this Period 9600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 11100.00

TOTAL This Period (last page this line number only) ..... ▶

10020734733

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 431 / 582
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MS. CAROL A. VALLELY

Mailing Address P.O. BOX 451

City KENTFIELD State CA Zip Code 94914-0451

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation C.P.A.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2010

Transaction ID: SA11.40450

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. RICHARD VALLIERE

Mailing Address 255 CROSSROADS BLVD. #346

City CARMEL State CA Zip Code 93923-8650

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 ▼ 1200.00

Date of Receipt 09 / 15 / 2010

Transaction ID: SA11.40476

Amount of Each Receipt this Period 1200.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. DONALD VALPREDO

Mailing Address 2101 METTLER FRONTAGE ROAD E.

City BAKERSFIELD State CA Zip Code 93307-9649

FEC ID number of contributing federal political committee. **C**

Name of Employer DONALD VALPREDO FARMS Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2010

Transaction ID: SA11.45284

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2200.00

TOTAL This Period (last page this line number only) ..... ▶

10020734795

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 432 / 582
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. CLAIRE A. VAN KONYNENBURG

Mailing Address 13681 W. SUNSET BLVD.

City State Zip Code  
**PACIFIC PALISADES CA 90272-4019**

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 ▼  
4800.00

Date of Receipt  
MM / DD / YYYY  
09 / 13 / 2010

Transaction ID: SA11.39410

Amount of Each Receipt this Period  
4800.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. D. MICHAEL VAN KONYNENBURG

Mailing Address 13681 W. SUNSET BLVD.

City State Zip Code  
**PACIFIC PALISADES CA 90272-4019**

FEC ID number of contributing federal political committee. **C**

Name of Employer  
EASTDIL SECURED Occupation  
REAL ESTATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4800.00

Date of Receipt  
MM / DD / YYYY  
09 / 13 / 2010

Transaction ID: SA11.39414

Amount of Each Receipt this Period  
4800.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. ANDY VANDERWIEL

Mailing Address 5547 MEADOWS DEL MAR

City State Zip Code  
**SAN DIEGO CA 92130-4865**

FEC ID number of contributing federal political committee. **C**

Name of Employer  
WAXIE Occupation  
VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2010

Transaction ID: SA11.44105

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **12000.00**

**TOTAL** This Period (last page this line number only) ..... ▶

10020734795

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 433 / 582
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. GEORGE WILLIAM VANDEWEGHE, JR.**

Mailing Address **3733 WERNER STREET**

City **SAN DIEGO** State **CA** Zip Code **92106-3246**

FEC ID number of contributing federal political committee. **C**

Name of Employer **R. A. CAPITAL ADVISORS L.-L.C.** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 15 / 2010**

Transaction ID: **SA11.40455**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. STANLEY O. VANVLECK**

Mailing Address **1445 45TH STREET**

City **SACRAMENTO** State **CA** Zip Code **95819-4137**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STERN, VANVLECK & MCCARRON** Occupation **ATTORNEY**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50787**

Amount of Each Receipt this Period **2000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MS. MARY S. VASINDA**

Mailing Address **7900 CORTE BAJO**

City **BAKERSFIELD** State **CA** Zip Code **93309-7132**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AROUND THE CLOCK HEALTH CARE** Occupation **BUSINESS OWNER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 27 / 2010**

Transaction ID: **SA11.49289**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **3500.00**

**TOTAL** This Period (last page this line number only) .....

10020734705

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 434 / 582

(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. ALEXANDER S. VELLANDI**

Mailing Address **17 WEDGEWOOD LANE**

City State Zip Code  
**LADERA RANCH CA 92694-0314**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**ORANGE COUNTY PROPERTY COMPANY REAL ESTATE CONSULTANT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt

**09 / 10 / 2010**

Transaction ID: **SA11.38925**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MRS. BEVERLY VERANO**

Mailing Address **30900 RANCHO VEJO ROAD**

City State Zip Code  
**SAN JUAN CAPISTRAN CA 92675-1762**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**09 / 30 / 2010**

Transaction ID: **SA11.58762**

Amount of Each Receipt this Period

**250.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MR. HUGH T. VERANO, JR.**

Mailing Address **37 CANTILENA**

City State Zip Code  
**SAN CLEMENTE CA 92673-2740**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**VERANO & VERANO PARTNER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**09 / 30 / 2010**

Transaction ID: **SA11.58764**

Amount of Each Receipt this Period

**250.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) .....

**1000.00**

TOTAL This Period (last page this line number only) .....

10020734797

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 435 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. JUDGE VERITY Mailing Address P.O. BOX 82219 City OKLAHOMA CITY State OK Zip Code 73148-0219 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 13 / 2010 Transaction ID: SA11.39391 Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
	Name of Employer Occupation BIG D. INDUSTRIES EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) MR. SCOTT VERTREES Mailing Address 16 GREENVIEW DRIVE City CARLSBAD State CA Zip Code 92009-6913 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 17 / 2010 Transaction ID: SA11.43482 Amount of Each Receipt this Period 500.00 CONTRIBUTION
	Name of Employer Occupation DUVERA C.E.O. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MR. PAUL A. VIOLICH Mailing Address P.O. BOX 875 City KENTFIELD State CA Zip Code 94914-0875 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 22 / 2010 Transaction ID: SA11.45268 Amount of Each Receipt this Period 2500.00 CONTRIBUTION	
	Name of Employer Occupation VIOLICH FARMS AGRONOMIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00	
	SUBTOTAL of Receipts This Page (optional) ..... ▶ 4000.00	
	TOTAL This Period (last page this line number only) ..... ▶	

10020734788

**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 436 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. ROBERT A. VIRTUE Mailing Address 4 MAVERICK LANE City State Zip Code ROLLING HILLS CA 90274-5230 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer VIRCO MFG. CORPORATION Occupation C.E.O. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4800.00	Date of Receipt MM / DD / YYYY 08 / 16 / 2010 Transaction ID: SA11.26292 Amount of Each Receipt this Period 2400.00 CONTRIBUTION
--	--

<b>B.</b> Full Name (Last, First, Middle Initial) MR. ROBERT A. VIRTUE Mailing Address 4 MAVERICK LANE City State Zip Code ROLLING HILLS CA 90274-5230 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer VIRCO MFG. CORPORATION Occupation C.E.O. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4800.00	Date of Receipt MM / DD / YYYY 09 / 29 / 2010 Transaction ID: SA11.50743 Amount of Each Receipt this Period 2400.00 CONTRIBUTION
--	--

<b>C.</b> Full Name (Last, First, Middle Initial) MRS. VETTA VIRTUE Mailing Address 4 MAVERICK LANE City State Zip Code ROLLING HILLS CA 90274-5230 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer HOMEMAKER Occupation HOMEMAKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4800.00	Date of Receipt MM / DD / YYYY 08 / 16 / 2010 Transaction ID: SA11.26293 Amount of Each Receipt this Period 2400.00 CONTRIBUTION
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SUBTOTAL of Receipts This Page (optional) .....	7200.00
TOTAL This Period (last page this line number only) .....	

10020734733



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 437 / 582
	(check only one)
<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. VETTA VIRTUE

Mailing Address **4 MAVERICK LANE**

City **ROLLING HILLS** State **CA** Zip Code **90274-5230**

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 ▼ **4800.00**

Date of Receipt **09 / 30 / 2010**

Transaction ID: SA11.58968

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
MR. BRUCE R. VOGEL

Mailing Address **P.O. BOX 104**

City **SAN MATEO** State **CA** Zip Code **94401-0104**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SPEAKERS LECTURE SERIES** Occupation **PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 10 / 2010**

Transaction ID: SA11.38944

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
MR. STEVE VOLPE

Mailing Address **7770 ROAD 33**

City **MADERA** State **CA** Zip Code **93636-8307**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ROYAL MADERA VINEYARDS** Occupation **GROWER/PACKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 08 / 2010**

Transaction ID: SA11.36372

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **3900.00**

**TOTAL** This Period (last page this line number only) .....

1002071488

**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 438 / 582
<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RANDY VOSTI**

Mailing Address **224 MIRASOL WAY**

City **MONTEREY** State **CA** Zip Code **93940-7618**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **BUSINESS OWNER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 08 / 2010**

Transaction ID: **SA11.36396**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM A. VOXMAN**

Mailing Address **355 S. GRAND**

City **LOS ANGELES** State **CA** Zip Code **90071-1560**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LATHAM & WATKINS L.L.P.** Occupation **LAWYER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 22 / 2010**

Transaction ID: **SA11.45256**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. KARLA VUKELICH**

Mailing Address **33 LAS CASCADAS**

City **ORINDA** State **CA** Zip Code **94563-2408**

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 ▼ **500.00**

Date of Receipt **09 / 24 / 2010**

Transaction ID: **SA11.48329**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **2000.00**

**TOTAL** This Period (last page this line number only) .....

100320714707004

**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 439 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL F. VUKELICH</b>		Date of Receipt MM / DD / YYYY <b>09 / 24 / 2010</b>
Mailing Address <b>33 LAS CASCADAS</b>		Transaction ID: <b>SA11.48349</b>
City <b>ORINDA</b>	State <b>CA</b>	Zip Code <b>94563-2408</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>COLOR SPOT NURSERIES INC</b>	Occupation <b>NURSERYMAN</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MS. DIANA M. VUYLSTEKE</b>		Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
Mailing Address <b>211 N. BROADWAY SUITE 3600</b>		Transaction ID: <b>SA11.33511</b>
City <b>SAINT LOUIS</b>	State <b>MO</b>	Zip Code <b>63102-2769</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>BRYAN COVE, L.L.P.</b>	Occupation <b>ATTORNEY/PARTNER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. JAMES WAGNER</b>		Date of Receipt MM / DD / YYYY <b>09 / 01 / 2010</b>
Mailing Address <b>2253 W. KEATS AVENUE</b>		Transaction ID: <b>SA11.30289</b>
City <b>FRESNO</b>	State <b>CA</b>	Zip Code <b>93711-2819</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>WAGNER &amp; WAGNER</b>	Occupation <b>ATTORNEY</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734802

**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 440 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>MR. RAYMOND T. WAGNER, JR.</b>		Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
Mailing Address <b>313 SAINT ANDREWS COURT</b>		Transaction ID: <b>SA11.33513</b>
City <b>BALLWIN</b>	State <b>MO</b>	Zip Code <b>63011-2504</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1200.00</b>
Name of Employer <b>ENTERPRISE RENT-A-CAR</b>	Occupation <b>VP</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1200.00</b>	

B. Full Name (Last, First, Middle Initial) <b>MRS. RUTH WAGNER</b>		Date of Receipt MM / DD / YYYY <b>09 / 01 / 2010</b>
Mailing Address <b>2253 W. KEATS AVENUE</b>		Transaction ID: <b>SA11.30285</b>
City <b>FRESNO</b>	State <b>CA</b>	Zip Code <b>93711-2819</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

C. Full Name (Last, First, Middle Initial) <b>MR. H. REID WAGSTAFF</b>		Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>
Mailing Address <b>9933 HOLT ROAD</b>		Transaction ID: <b>SA11.27697</b>
City <b>CARMEL</b>	State <b>CA</b>	Zip Code <b>93923-8587</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1200.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1200.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073430

**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 441 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>MS. SUSAN S. WAGSTAFF</b>		Date of Receipt MM / DD / YYYY <b>08 / 19 / 2010</b>	
Mailing Address <b>9933 HOLT ROAD</b>		Transaction ID: <b>SA11.27662</b>	
City <b>CARMEL</b>	State <b>CA</b>	Zip Code <b>93923-8587</b>	Amount of Each Receipt this Period <b>1200.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	Aggregate Year-to-Date <b>1200.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) <b>MR. HOWARD WALDOW</b>		Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>	
Mailing Address <b>11963 CREST PLACE</b>		Transaction ID: <b>SA11.50742</b>	
City <b>BEVERLY HILLS</b>	State <b>CA</b>	Zip Code <b>90210-1321</b>	Amount of Each Receipt this Period <b>2400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	Aggregate Year-to-Date <b>2400.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) <b>MR. BROOKS WALKER, JR.</b>		Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>	
Mailing Address <b>2930 BROADWAY STREET</b>		Transaction ID: <b>SA11.58977</b>	
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94115-1062</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	Aggregate Year-to-Date <b>250.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) .....	<b>3850.00</b>
TOTAL This Period (last page this line number only) .....	[ ]

100207141

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 442 / 582
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>MRS. DANIELLE WALKER</b>		Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
Mailing Address <b>2930 BROADWAY STREET</b>		Transaction ID: <b>SA11.58941</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94115-1062</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>		CONTRIBUTION
Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	

B. Full Name (Last, First, Middle Initial) <b>MR. DAVID L. WALLACE</b>		Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>2853 KEN GRAY BLVD. SUITE 4</b>		Transaction ID: <b>SA11.50708</b>
City <b>WEST FRANKFORT</b>	State <b>IL</b>	Zip Code <b>62896-4289</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>WALLACE ELECTRICAL SYSTEMS</b>		CONTRIBUTION
Occupation <b>BUSINESS OWNER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	

C. Full Name (Last, First, Middle Initial) <b>MR. JOEL WALLACE</b>		Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
Mailing Address <b>P.O. BOX 2325</b>		Transaction ID: <b>SA11.58969</b>
City <b>MERCED</b>	State <b>CA</b>	Zip Code <b>95344-0325</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>WALLACE CASCADE TRANSPORT</b>		CONTRIBUTION
Occupation <b>TRUCKING</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>1750.00</b>
TOTAL This Period (last page this line number only) .....	

10020734805

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 443 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. KIMBERLY R. WALSH Mailing Address 13000 SKYLINE ROAD City OAKLAND State CA Zip Code 94619-3523 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y 09 / 20 / 2010 Transaction ID: SA11.43592 Amount of Each Receipt this Period 250.00 CONTRIBUTION	
	Name of Employer SELF-EMPLOYED Occupation EXECUTIVE CONSULTING Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) MR. SEAN THOMAS WALSH Mailing Address 13000 SKYLINE ROAD City OAKLAND State CA Zip Code 94619-3523 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y 09 / 20 / 2010 Transaction ID: SA11.43581 Amount of Each Receipt this Period 250.00 CONTRIBUTION
	Name of Employer BINGHAM MCCUTCHEN Occupation CONSULTANT 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) MS. HELEN WANG Mailing Address 7340 VIEWPOINT ROAD City APTOS State CA Zip Code 95003-3307 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y 09 / 02 / 2010 Transaction ID: SA11.33467 Amount of Each Receipt this Period 2400.00 CONTRIBUTION	
	Name of Employer SARITOSA MEDICAL CLINIC Occupation REGISTERED NURSE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.00	
	SUBTOTAL of Receipts This Page (optional) ..... ▶	2900.00
	TOTAL This Period (last page this line number only) ..... ▶	[ ]

1002074488

**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 444 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. JAMES R. WANGLER</b>	Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
Mailing Address <b>1188 BROCKTON STREET</b>	Transaction ID: <b>SA11.58933</b>
City <b>EL CAJON</b> State <b>CA</b> Zip Code <b>92020-1707</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b> Occupation <b>ENGINEER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. DONALD WARD</b>	Date of Receipt MM / DD / YYYY <b>09 / 30 / 2010</b>
Mailing Address <b>11 PROMONTORY</b>	Transaction ID: <b>SA11.58914</b>
City <b>TRABUCO CANYON</b> State <b>CA</b> Zip Code <b>92679-3811</b>	Amount of Each Receipt this Period <b>400.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>GA PACIFIC</b> Occupation <b>SALES</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>400.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. JOHN C. WARNER</b>	Date of Receipt MM / DD / YYYY <b>09 / 10 / 2010</b>
Mailing Address <b>1017 GRANVILLE DRIVE</b>	Transaction ID: <b>SA11.38960</b>
City <b>NEWPORT BEACH</b> State <b>CA</b> Zip Code <b>92660-6205</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1150.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734807



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 445 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. JOHN H. WARNER, JR.	Date of Receipt MM / DD / YYYY 09 / 08 / 2010
	Mailing Address P.O. BOX 2929	Transaction ID: SA11.36398
	City LAJOLLA State CA Zip Code 92038-2929	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>B.</b>	Full Name (Last, First, Middle Initial) MS. BARBARA J. WARREN	Date of Receipt MM / DD / YYYY 09 / 23 / 2010
	Mailing Address P.O. BOX 675335	Transaction ID: SA11.47345
	City RANCHO SANTA FE State CA Zip Code 92067-5335	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
<b>C.</b>	Full Name (Last, First, Middle Initial) MR. ROBERT S. WARREN	Date of Receipt MM / DD / YYYY 08 / 19 / 2010
	Mailing Address 2180 ORLANDO ROAD	Transaction ID: SA11.27676
	City SAN MARINO State CA Zip Code 91108-1328	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
Name of Employer GIBSON DUNN & CRUTCHER	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		3500.00
<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 446 / 582
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN G. WATERBURY**

Mailing Address **1801 OAKLAND BLVD.  
SUITE 310**

City **WALNUT CREEK** State **CA** Zip Code **94596-7014**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WATERBURY PROPERTIES** Occupation **SELF-EMPLOYED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 27 / 2010**

Transaction ID: **SA11.49823**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. SUSAN WATERSON**

Mailing Address **18999 W. AMERICAN AVENUE**

City **HILMAR** State **CA** Zip Code **95324-9329**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WATERSON PROPERTIES** Occupation **PARTNER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 21 / 2010**

Transaction ID: **SA11.44115**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES CRAIG WATSON**

Mailing Address **142 WATSON LANE**

City **FAYETTE CITY** State **PA** Zip Code **15438-1207**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GLOBAL MINE SERVICE, RECO-NCO** Occupation **PRESIDENT/OWNER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 27 / 2010**

Transaction ID: **SA11.49137**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **3000.00**

**TOTAL** This Period (last page this line number only) .....

10020734809

**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 447 / 582							
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. RAY WATSON

Mailing Address 8913 GASCONY COURT

City BAKERSFIELD State CA Zip Code 93311-1526

FEC ID number of contributing federal political committee. **C**

Name of Employer COUNTY OF KEON Occupation COUNTY SUPERVISOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 09 / 2010

Transaction ID: SA11.38715

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. DAVID STENTON WAX

Mailing Address 17302 CALLE SERENA

City RANCHO SANTA FE State CA Zip Code 92067

FEC ID number of contributing federal political committee. **C**

Name of Employer WAXIE SANITARY SUPPLY Occupation BUSINESS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 09 / 23 / 2010

Transaction ID: SA11.47380

Amount of Each Receipt this Period 4800.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. ROBERT T. WAYMAN

Mailing Address 26220 MOODY ROAD

City LOS ALTOS HILLS State CA Zip Code 94022-4303

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 ▼ 2500.00

Date of Receipt 09 / 16 / 2010

Transaction ID: SA11.42645

Amount of Each Receipt this Period 2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 8300.00

TOTAL This Period (last page this line number only) ..... ▶

10020734810

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 448 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. SUSAN WAYMAN

Mailing Address 26220 MOODY ROAD

City State Zip Code  
**LOS ALTOS HILLS CA 94022-4303**

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 ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

Transaction ID: SA11.42641

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MRS. SANDRA MAE WAYMIRE

Mailing Address P.O. BOX 1061

City State Zip Code  
**HANFORD CA 93232-1061**

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 ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36371

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. VERNON RUSSELL WAYMIRE

Mailing Address P.O. BOX 1061

City State Zip Code  
**HANFORD CA 93232-1061**

FEC ID number of contributing federal political committee. **C**

Name of Employer  
SELF-EMPLOYED Occupation  
CONSULTING & REAL ESTATE

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36408

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3100.00

**TOTAL** This Period (last page this line number only) ..... ▶

10020734811

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 449 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. BILL WEBB

Mailing Address 1220 COUNTRYVIEW DRIVE

City Modesto State CA Zip Code 95356-9687

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 ▼ 500.00

Date of Receipt 09 / 20 / 2010  
Transaction ID: SA11.43590  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MRS. MARSHA WEBB

Mailing Address 1220 COUNTRYVIEW DRIVE

City Modesto State CA Zip Code 95356-9687

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 ▼ 500.00

Date of Receipt 09 / 20 / 2010  
Transaction ID: SA11.43586  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. CLARENCE WECKMAN

Mailing Address 9856 SILLS LANE

City Brownsville State CA Zip Code 95919-9752

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation VOLUNTEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2010  
Transaction ID: SA11.43488  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1250.00

**TOTAL** This Period (last page this line number only) ..... ▶

10020734812

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 450 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. JOHN A. WEISSENBACH

Mailing Address 301 20TH STREET

City State Zip Code  
**SANTA MONICA CA 90402-2413**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
KIRKLAND & ELLIS, L.L.P. ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: SA11.50744

Amount of Each Receipt this Period  
333.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MS. LINDA WEISS

Mailing Address 28138 ANGELICA PLACE

City State Zip Code  
**VALENCIA CA 91354-1499**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
OAKTREE CAPITAL MANAGEMENT MANAGING DIRECTOR, MARKETING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2010

Transaction ID: SA11.40324

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MRS. LISA WENDT

Mailing Address 1 MUIR LOOP

City State Zip Code  
**SAN FRANCISCO CA 94129-1123**

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 ▼  
10000.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36363

Amount of Each Receipt this Period  
10000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **11333.00**

**TOTAL** This Period (last page this line number only) ..... ▶

10020734813

**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 451 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. BARBARA WEST

Mailing Address 1406 ROCKHAVEN ROAD

City Modesto State CA Zip Code 95356-8706

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS  
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

Transaction ID: SA11.48308

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. GARY WEST

Mailing Address 1406 ROCKHAVEN ROAD

City Modesto State CA Zip Code 95356-8706

FEC ID number of contributing federal political committee. **C**

Name of Employer J. S. WEST  
Occupation FARMER/MERCHANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

Transaction ID: SA11.48312

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MRS. GARY WEST

Mailing Address P.O. BOX 1041

City Modesto State CA Zip Code 95353-1041

FEC ID number of contributing federal political committee. **C**

Name of Employer HILMAR POULTRY RANCH  
Occupation FARMING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2010

Transaction ID: SA11.44130

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 5000.00

TOTAL This Period (last page this line number only) ..... ▶

10020734817

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 452 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
MR. DEAN R. WESTLY

Mailing Address 101 METRO DRIVE  
SUITE 250

City SAN JOSE State CA Zip Code 95110-1343

FEC ID number of contributing federal political committee. **C**

Name of Employer LAW OFFICES Occupation ATTORNEY

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

Transaction ID: SA11.42689

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. BRUCE A. WESTPHAL

Mailing Address 60 BERRY DRIVE

City PACHECO State CA Zip Code 94553-5601

FEC ID number of contributing federal political committee. **C**

Name of Employer BAY ALARM CO Occupation DIRECTOR

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

Transaction ID: SA11.47383

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. ROBERT WHALEN

Mailing Address 2352 VIA CAPRI COURT

City LA JOLLA State CA Zip Code 92037-3930

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  
MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36435

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2500.00

TOTAL This Period (last page this line number only) ..... ▶

10020734815



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 453 / 582

(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. ROBERT WHALEN**

Mailing Address **2352 VIA CAPRI COURT**

City State Zip Code  
**LA JOLLA CA 92037-3930**

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 ▼  
**2000.00**

Date of Receipt

**09 / 15 / 2010**

Transaction ID: **SA11.40319**

Amount of Each Receipt this Period

**1000.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MR. KURT C. WHEELER**

Mailing Address **25487 ADOBE LANE**

City State Zip Code  
**LOS ALTOS HILLS CA 94022-4502**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**CLARKS VENTURES VENTURE CAPITALIST**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**15000.00**

Date of Receipt

**08 / 03 / 2010**

Transaction ID: **SA11.26303**

Amount of Each Receipt this Period

**15000.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MR. ALAN WHITE**

Mailing Address **2514 EDINGAL DRIVE**

City State Zip Code  
**BAKERSFIELD CA 93311-8550**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**OCCIDENTAL ELK HILLS ENGINEER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt

**09 / 13 / 2010**

Transaction ID: **SA11.39374**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

**16500.00**

TOTAL This Period (last page this line number only) ▶

10020734310

**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 454 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ANDY D. WHITE**

Mailing Address **R.R. 5 BOX 89A**

City **MC LEANSBORO** State **IL** Zip Code **62859-9388**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SOUTHERN F.S.** Occupation **FUEL SALES**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50710**

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN E. WHITESCARVER**

Mailing Address **R.R. 4 BOX 74**

City **GRAFTON** State **WV** Zip Code **26354-9310**

FEC ID number of contributing federal political committee. **C**

Name of Employer **QUALITY HYDRAULICS, INC** Occupation **TREASURER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 27 / 2010**

Transaction ID: **SA11.49383**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT WHITE**

Mailing Address **23 CHADWICK ROAD**

City **WESTON** State **MA** Zip Code **02493-1523**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BAIN CAPITOL** Occupation **INVESTMENTS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50745**

Amount of Each Receipt this Period **2400.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... **3150.00**

**TOTAL** This Period (last page this line number only) ..... **3150.00**

10020734817

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 455 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL R.V. WHITMAN**

Mailing Address **44 MONTGOMERY STREET  
SUITE 920**

City **SAN FRANCISCO** State **CA** Zip Code **94104-4611**

FEC ID number of contributing federal political committee. **C**

Name of Employer **S.F.A. MANAGEMENT** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 29 / 2010**  
Transaction ID: **SA11.50725**  
Amount of Each Receipt this Period **500.00**  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD WHITT**

Mailing Address **19 1/2 SPRINGHAVEN ROAD**

City **WHEELING** State **WV** Zip Code **26003-6021**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TRADET, INC.** Occupation **LABORATORY MANAGER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 27 / 2010**  
Transaction ID: **SA11.49143**  
Amount of Each Receipt this Period **250.00**  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. KARIN ELIZABETH WICK**

Mailing Address **170 RAMOSO ROAD**

City **PORTOLA VALLEY** State **CA** Zip Code **94028-7328**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **09 / 03 / 2010**  
Transaction ID: **SA11.33590**  
Amount of Each Receipt this Period **5000.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **5750.00**

**TOTAL** This Period (last page this line number only) .....

1002074411

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 456 / 582

(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)  
CARLY VICTORY COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
MR. PAUL HENRY WICK

Mailing Address 170 RAMOSO ROAD

City PORTOLA VALLEY State CA Zip Code 94028-7328

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERIPRISE FINANCIAL Occupation MUTUAL FUND/HEDGE FUND MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 03 / 2010

Transaction ID: SA11.33596

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MRS. LISA WILCOX-CASSIDY

Mailing Address P.O. BOX 3535

City RANCHO SANTA FE State CA Zip Code 92067-3535

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 ▼ 30000.00

Date of Receipt 08 / 24 / 2010

Transaction ID: SA11.28181

Amount of Each Receipt this Period 20000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. JOHN WILCZAK

Mailing Address 2813 BASELINE AVENUE

City SANTA YNEZ State CA Zip Code 93460-9749

FEC ID number of contributing federal political committee. **C**

Name of Employer META TOOLS, INC. Occupation C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2010

Transaction ID: SA11.50746

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 26000.00

TOTAL This Period (last page this line number only) ..... ▶

10020770700

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 457 / 582
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. BRUCE W. WILKINSON**

Mailing Address **6363 WOOD WAY  
SUITE 640**

City **HOUSTON** State **TX** Zip Code **77057-1757**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ANCORA PARTNERS, L.L.C.** Occupation **PRIVATE EQUITY INVESTOR**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 02 / 2010**

Transaction ID: **SA11.33512**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. KEITH WILKINSON**

Mailing Address **626 BROOKLYN AVENUE  
APARTMENT 8A**

City **EVANSVILLE** State **IN** Zip Code **47715-8173**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BRAKE SUPPLY** Occupation **OUTSIDE SALES REPRESENTATIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50711**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. GORDON WILLIAMS**

Mailing Address **7591 E. WETHERSFIELD ROAD**

City **SCOTTSDALE** State **AZ** Zip Code **85260-4722**

FEC ID number of contributing federal political committee. **C**

Name of Employer **E.D.I. INC.** Occupation **PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50712**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **2000.00**

**TOTAL** This Period (last page this line number only) .....

10020734820

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 458 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. JAMES C. WILLIAMS</b>		Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>	
Mailing Address <b>950 TIRRILL FARMS</b>		Transaction ID: <b>SA11.33474</b>	
City <b>SAINT LOUIS</b>	State <b>MO</b>	Zip Code <b>63124-1631</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>OI VENTURES</b>	Occupation <b>VENTURE CAPITAL</b>	Aggregate Year-to-Date <b>1000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) <b>MR. ROGER D. WILLIAMS</b>		Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>	
Mailing Address <b>233 LA BARRAWCA DRIVE</b>		Transaction ID: <b>SA11.33469</b>	
City <b>SOLANA BEACH</b>	State <b>CA</b>	Zip Code <b>92075-1715</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>TSI OF SAN DIEGO</b>	Occupation <b>TELECOM SYSTEM SALES &amp; SERVICES</b>	Aggregate Year-to-Date <b>500.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) <b>MS. DIANE B. WILSEY</b>		Date of Receipt MM / DD / YYYY <b>07 / 30 / 2010</b>	
Mailing Address <b>2590 JACKON STREET</b>		Transaction ID: <b>SA11.26322</b>	
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94115-1121</b>	Amount of Each Receipt this Period <b>15000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer <b>A. WILSEY PROPERTIES</b>	Occupation <b>PRESIDENT</b>	Aggregate Year-to-Date <b>15000.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>16500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020714821

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 459 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. DAVID W. WILSON Mailing Address 1400 N. TUSTIN City ORANGE State CA Zip Code 92867-3902 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 08 / 16 / 2010 Transaction ID: SA11.26319 Amount of Each Receipt this Period 30400.00 CONTRIBUTION
Name of Employer TOYOTA OF ORANGE Occupation AUTO DEALER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 30400.00		
<b>B.</b> Full Name (Last, First, Middle Initial) MR. JAMES W. WILSON Mailing Address 10 CASTLEBAR City IRVINE State CA Zip Code 92618-4043 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 02 / 2010 Transaction ID: SA11.33458 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
Name of Employer ENTERPRISE Occupation SALES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) MRS. MARILYN M. WILSON Mailing Address 416 VIA EL CHICO City REDONDO BEACH State CA Zip Code 90277-6758 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 24 / 2010 Transaction ID: SA11.48335 Amount of Each Receipt this Period 1500.00 CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		
SUBTOTAL of Receipts This Page (optional) .....		32900.00
TOTAL This Period (last page this line number only) .....		

10020734822

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 460 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. JAMES WINTERSTEEN**

Mailing Address **27 MYRTLE AVENUE**

City **MILL VALLEY** State **CA** Zip Code **94941-1023**

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 **09 / 20 / 2010**

Transaction ID: **SA11.43562**

Amount of Each Receipt this Period **2000.00**

**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MR. DENNIS WITHSOSKY**

Mailing Address **1018 CUDAHY PLACE**

City **SAN DIEGO** State **CA** Zip Code **92110-3939**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NEW DIMENSION MASONRY INC.** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **09 / 22 / 2010**

Transaction ID: **SA11.45494**

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**MR. WILLIAM B. WITMER, JR.**

Mailing Address **26000 PASEO DE LOS ROBLES**

City **SALINAS** State **CA** Zip Code **93908-8604**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **AGRICULTURE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 08 / 2010**

Transaction ID: **SA11.36364**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5400.00**

**TOTAL** This Period (last page this line number only) ..... ▶

11  
10  
09  
08  
07  
06  
05  
04  
03  
02  
01



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 461 / 582

(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)

CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. MICHAEL WOJCIECHOWSKI Mailing Address 16686 VIA LA COSTA City State Zip Code PACIFIC PALISADES CA 90272-1950 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y 09 / 22 / 2010 Transaction ID: SA11.45244 Amount of Each Receipt this Period 2000.00 CONTRIBUTION	
	Name of Employer Occupation SELF-EMPLOYED REAL ESTATE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00	
	Full Name (Last, First, Middle Initial) MRS. LAURA G. WOLBART Mailing Address 20225 LANDING CIRCLE City State Zip Code YORBA LINDA CA 92887-3261 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y 09 / 13 / 2010 Transaction ID: SA11.39408 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
	Name of Employer Occupation LSI REGIONAL SALES MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) MRS. MIREILLE WOLFE Mailing Address 22578 FLAMINGO STREET City State Zip Code WOODLAND HILLS CA 91364-4916 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y 08 / 24 / 2010 Transaction ID: SA11.28184 Amount of Each Receipt this Period 2400.00 CONTRIBUTION	
	Name of Employer Occupation SELF-EMPLOYED R.N. PSYCHOTHERAPIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.00	
	SUBTOTAL of Receipts This Page (optional) ..... ▶ 5400.00	
	TOTAL This Period (last page this line number only) ..... ▶	

10020734324

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 462 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MS. CYNTHIA K. WOLLAEGER**

Mailing Address **7256 COUNTRY CLUB DRIVE**

City **LAJOLLA** State **CA** Zip Code **92037-5614**

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 ▼ **1200.00**

Date of Receipt **09 / 30 / 2010**  
Transaction ID: SA11.58754  
Amount of Each Receipt this Period **1200.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. TOM WOLLENMAN**

Mailing Address **10463 E. ACACIA AVENUE**

City **CLOVIS** State **CA** Zip Code **93619-4634**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **FARMING**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 09 / 2010**  
Transaction ID: SA11.38714  
Amount of Each Receipt this Period **500.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. DAVID E. WOOD**

Mailing Address **652 W. CROMWELL**

City **FRESNO** State **CA** Zip Code **93711-5715**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WOOD AND DEVINE CATTLE COMPANY** Occupation **PARTNER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4800.00**

Date of Receipt **09 / 09 / 2010**  
Transaction ID: SA11.38710  
Amount of Each Receipt this Period **4800.00**  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... **6500.00**

TOTAL This Period (last page this line number only) .....

10020734824

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 463 / 582
	(check only one)
<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. FARLEY R. WOOD**

Mailing Address **43975 LODGE HILL ROAD**

City **ST. CLAIRSVILLE** State **OH** Zip Code **43950-9769**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MURRAY ENERGY CORPORATION** Occupation **DIRECTOR, ENVIRONMENTAL COMPLIANCE & P**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 27 / 2010**

Transaction ID: **SA11.49153**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. J. NELSON WOOD**

Mailing Address **P.O. BOX 828**

City **MT. VERNON** State **IL** Zip Code **62864-0017**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE AMERICAN COAL COMPANY** Occupation **LAND MANAGER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **09 / 27 / 2010**

Transaction ID: **SA11.49152**

Amount of Each Receipt this Period **390.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. KAY H. WOODS**

Mailing Address **3570 JACKSON STREET**

City **SAN FRANCISCO** State **CA** Zip Code **94118-1808**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SCOTCH PLYWOOD COMPANY** Occupation **CHAIRMAN OF THE BOARD**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50614**

Amount of Each Receipt this Period **5000.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... **5640.00**

**TOTAL** This Period (last page this line number only) .....

10020734828

**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 464 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MS. PAULA M. WOOLCOTT</b>		Date of Receipt MM / DD / YYYY <b>09 / 23 / 2010</b>
Mailing Address <b>430 HAMPTON ROAD</b>		Transaction ID: <b>SA11.47340</b>
City <b>PIEDMONT</b>	State <b>CA</b>	Zip Code <b>94611-3317</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>		<b>CONTRIBUTION</b>
Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. BERTIE WOOLF</b>		Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>8430 WHALE WATCH WAY</b>		Transaction ID: <b>SA11.39355</b>
City <b>LA JOLLA</b>	State <b>CA</b>	Zip Code <b>92037-2050</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>4800.00</b>
Name of Employer <b>SELF-EMPLOYED</b>		<b>CONTRIBUTION</b>
Occupation <b>EXECUTIVE CHAIRMAN</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>4800.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>MR. CHRISTOPHER WOOLF</b>		Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
Mailing Address <b>4489 N. VAN NESS BLVD.</b>		Transaction ID: <b>SA11.49279</b>
City <b>FRESNO</b>	State <b>CA</b>	Zip Code <b>93704-3725</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer <b>LOS GATOS TOMATO</b>		<b>CONTRIBUTION</b>
Occupation <b>FARMER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>7450.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734827

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 465 / 582
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MRS. LISA P. WOOLF

Mailing Address 3917 N. WILSON

City FRESNO State CA Zip Code 93704-4137

FEC ID number of contributing federal political committee. **C**

Name of Employer WOOLF ENTERPRISES Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 09 / 2010  
Transaction ID: SA11.38744  
Amount of Each Receipt this Period 1200.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. STUART WOOLF

Mailing Address 3917 N. WILSON

City FRESNO State CA Zip Code 93704-4137

FEC ID number of contributing federal political committee. **C**

Name of Employer WOOLF FARMING & PROCESSING Occupation FARMER/FOOD PROCESSOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 09 / 2010  
Transaction ID: SA11.38713  
Amount of Each Receipt this Period 1200.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. JOHN M. WORD, III

Mailing Address 721 SOUTH PARKER STREET  
SUITE 300

City ORANGE State CA Zip Code 92868-4732

FEC ID number of contributing federal political committee. **C**

Name of Employer WORD AND BROWN Occupation PARTNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 09 / 20 / 2010  
Transaction ID: SA11.43567  
Amount of Each Receipt this Period 12500.00  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 14900.00

TOTAL This Period (last page this line number only) ..... ▶

1002073423

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 466 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. CHARLENE M. WORTLEY Mailing Address P.O. BOX 311 City Lodi State CA Zip Code 95241-0311 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 20 / 2010 Transaction ID: SA11.43605 Amount of Each Receipt this Period 250.00 <b>CONTRIBUTION</b>	
	Name of Employer SELF-EMPLOYED Occupation C.F.O. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) MR. DONALD S. WORTLEY Mailing Address P.O. BOX 311 City Lodi State CA Zip Code 95241-0311 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 20 / 2010 Transaction ID: SA11.43609 Amount of Each Receipt this Period 250.00 <b>CONTRIBUTION</b>
	Name of Employer D.S.W. AG, INC. Occupation SELF-EMPLOYED 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) MR. RICHARD J. WRENSEN Mailing Address 100 PINE STREET #560 City SAN FRANCISCO State CA Zip Code 94111-5103 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 29 / 2010 Transaction ID: SA11.50615 Amount of Each Receipt this Period 500.00 <b>CONTRIBUTION</b>	
	Name of Employer EASTERN LIGHT CAPITAL Occupation PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) ..... ▶	1000.00
	TOTAL This Period (last page this line number only) ..... ▶	[ ]

10020734829

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 467 / 582  
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**MS. BETTY WYLIE**

Mailing Address **1243 CARSON STREET**

City State Zip Code  
**COLUSA CA 95932-2050**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**SELF-EMPLOYED FARMER**

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 10 / 2010**

Transaction ID: **SA11.38980**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MR. CHRIS WYLIE**

Mailing Address **31595 DONALD AVENUE**

City State Zip Code  
**MADERA CA 93636-1475**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**AGRI WORLD COOPERATIVE RANCH MANAGER**

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**08 / 26 / 2010**

Transaction ID: **SA11.29462**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MR. GORDON B. WYLIE**

Mailing Address **314 10TH STREET**

City State Zip Code  
**COLUSA CA 95932-2215**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**SELF-EMPLOYED RICE FARMER**

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 16 / 2010**

Transaction ID: **SA11.42694**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... **1500.00**

TOTAL This Period (last page this line number only) ..... **1500.00**

10020734330

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 468 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. KAREN WYLIE Mailing Address 314 10TH STREET City COLUSA State CA Zip Code 95932-2215 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td> <td>1</td><td>6</td><td>/</td> <td>2</td><td>0</td><td>1</td><td>0</td><td></td><td></td> </tr> </table> Transaction ID: SA11.42727 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table> CONTRIBUTION	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	0	9	/	1	6	/	2	0	1	0			250.00									
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																									
0	9	/	1	6	/	2	0	1	0																											
250.00																																				
Name of Employer S.A.S. SHOE STORE Occupation RICE FARMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>		250.00																																		
250.00																																				
<b>B.</b> Full Name (Last, First, Middle Initial) MRS. DEBRA A. YARBROUGH RUSSO Mailing Address 1804 MASON ROAD City FAIRFIELD State CA Zip Code 94534-9607 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td> <td>2</td><td>7</td><td>/</td> <td>2</td><td>0</td><td>1</td><td>0</td><td></td><td></td> </tr> </table> Transaction ID: SA11.49404 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">7500.00</td> </tr> </table> CONTRIBUTION	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	0	9	/	2	7	/	2	0	1	0			7500.00									
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																									
0	9	/	2	7	/	2	0	1	0																											
7500.00																																				
Name of Employer B. & L. PROPERTIES Occupation OWNER/DEVELOPER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="10">7500.00</td> </tr> </table>		7500.00																																		
7500.00																																				
<b>C.</b> Full Name (Last, First, Middle Initial) MR. C. C. YIN Mailing Address 185 BUTCHER ROAD City VACAVILLE State CA Zip Code 95687-5656 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td> <td>2</td><td>9</td><td>/</td> <td>2</td><td>0</td><td>1</td><td>0</td><td></td><td></td> </tr> </table> Transaction ID: SA11.50831 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">10000.00</td> </tr> </table> CONTRIBUTION	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	0	9	/	2	9	/	2	0	1	0			10000.00									
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																									
0	9	/	2	9	/	2	0	1	0																											
10000.00																																				
Name of Employer YIN MCDONALDS Occupation OWNER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="10">10000.00</td> </tr> </table>		10000.00																																		
10000.00																																				
SUBTOTAL of Receipts This Page (optional) ..... ▶		<table border="1"> <tr> <td colspan="10">17750.00</td> </tr> </table>	17750.00																																	
17750.00																																				
TOTAL This Period (last page this line number only) ..... ▶		<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																																		

1002073431



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 469 / 582

(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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) MR. DEAN A. YOOST Mailing Address 24 BLACK FALCON City IRVINE State CA Zip Code 92603-0420 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2010 Transaction ID: SA11.40322 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
Name of Employer PRICE WATERHOUSE COOPERS Occupation CONSULTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) MRS. JENNIFER YOUNG Mailing Address 7600 AVENIDA VALEDOR City BAKERSFIELD State CA Zip Code 93309-2779 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 09 / 2010 Transaction ID: SA11.38414 Amount of Each Receipt this Period 500.00 CONTRIBUTION
Name of Employer HOMEMAKER Occupation HOMEMAKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) MR. MICHAEL YOUNG Mailing Address 7600 AVENIDA VALEDOR City BAKERSFIELD State CA Zip Code 93309-2779 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 09 / 2010 Transaction ID: SA11.38415 Amount of Each Receipt this Period 500.00 CONTRIBUTION
Name of Employer SELF-EMPLOYED Occupation FARMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		
SUBTOTAL of Receipts This Page (optional) ..... ▶		2000.00
TOTAL This Period (last page this line number only) ..... ▶		

10020734832

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 470 / 582
(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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. SELDON O. YOUNG**

Mailing Address **932 W. LANDS END ROAD**

City **FARMINGTON** State **UT** Zip Code **84025-4110**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **09 / 23 / 2010**

Transaction ID: **SA11.47372**

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. WALTER J. ZABLE**

Mailing Address **P.O. BOX 1525**

City **RANCHO SANTA FE** State **CA** Zip Code **92067-1525**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CUBIC CORPORATION** Occupation **PRESIDENT & C.E.O.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **08 / 30 / 2010**

Transaction ID: **SA11.29662**

Amount of Each Receipt this Period **5000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**ZLATKO ZADRO**

Mailing Address **5422 ARGOSY AVE.**

City **HUNTINGTON BEACH** State **CA** Zip Code **92649-1039**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ZADRO PRODUCTS, INC.** Occupation **MANAGER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50857**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **8400.00**

**TOTAL** This Period (last page this line number only) .....

1002073433

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 471 / 582

(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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MR. RONALD ZAGAMI Mailing Address 7651 RANSON ROAD City SAN DIEGO State CA Zip Code 92111-1511 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 23 / 2010 Transaction ID: SA11.47381 Amount of Each Receipt this Period 2400.00 CONTRIBUTION
Name of Employer CLAIREMONT EQUIPMENT COMP-ANY Occupation PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.00		
<b>B.</b> Full Name (Last, First, Middle Initial) MS. S. CHRISTINE ZANELLO Mailing Address 2050 FOREST VIEW AVENUE City HILLSBOROUGH State CA Zip Code 94010-6119 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2010 Transaction ID: SA11.39369 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
Name of Employer SELF-EMPLOYED Occupation LAWYER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) MR. ROBERT ZARNEGIN Mailing Address 421 N. BEVERLY DRIVE #350 City BEVERLY HILLS State CA Zip Code 90210-4640 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2010 Transaction ID: SA11.40323 Amount of Each Receipt this Period 2500.00 CONTRIBUTION
Name of Employer PROBITY INTERNATIONAL Occupation C.E.O. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		
SUBTOTAL of Receipts This Page (optional) ..... ▶		5900.00
TOTAL This Period (last page this line number only) ..... ▶		

1002073434

**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 472 / 582
<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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. JENNIE ZEFF Mailing Address 7605 SPY GLASS DRIVE City <b>MODESTO</b> State <b>CA</b> Zip Code <b>95356-9583</b> FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 20 / 2010 Transaction ID: SA11.43603 Amount of Each Receipt this Period 500.00 CONTRIBUTION
	Name of Employer HOMEMAKER Occupation HOMEMAKER
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Aggregate Year-to-Date ▼ 500.00

<b>B.</b> Full Name (Last, First, Middle Initial) MR. STEVEN ZEFF Mailing Address 7605 SPY GLASS DRIVE City <b>MODESTO</b> State <b>CA</b> Zip Code <b>95356-9583</b> FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 09 / 20 / 2010 Transaction ID: SA11.43608 Amount of Each Receipt this Period 500.00 CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation FARMER
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Aggregate Year-to-Date ▼ 500.00

<b>C.</b> Full Name (Last, First, Middle Initial) MR. RICHARD ZIEN Mailing Address 11111 SANTA MONICA BLVD. SUITE 2150 City <b>LOS ANGELES</b> State <b>CA</b> Zip Code <b>90025-3356</b> FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt MM / DD / YYYY 08 / 19 / 2010 Transaction ID: SA11.27573 Amount of Each Receipt this Period 2000.00 CONTRIBUTION
	Name of Employer MENDELSON ZIEN L.L.C. Occupation PRESIDENT
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Aggregate Year-to-Date ▼ 2000.00

SUBTOTAL of Receipts This Page (optional) .....	3000.00
TOTAL This Period (last page this line number only) .....	

140  
141  
142  
143  
144  
145  
146  
147  
148  
149  
150  
151

**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 473 / 582
	<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	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. K. JAMES ZINKAN</b>		Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
Mailing Address <b>7510 ROYAL PORTRUSH DRIVE</b>		Transaction ID: <b>SA11.49155</b>
City <b>SOLOON</b>	State <b>OH</b>	Zip Code <b>44139-5255</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1500.00</b>
Name of Employer <b>ZINKAN ENTERPRISES</b>	Occupation <b>OWNER</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1500.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>MR. PETER M. ZUBER</b>		Date of Receipt MM / DD / YYYY <b>09 / 15 / 2010</b>
Mailing Address <b>1180 ASHMOUNT AVENUE</b>		Transaction ID: <b>SA11.40451</b>
City <b>OAKLAND</b>	State <b>CA</b>	Zip Code <b>94610-1207</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>3000.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>3000.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>BAKERSFIELD WELL CASING</b>		Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>P.O. BOX 82575</b>		Transaction ID: <b>SA11.39378</b>
City <b>BAKERSFIELD</b>	State <b>CA</b>	Zip Code <b>93380-2575</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000.00</b>
Name of Employer	Occupation	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2000.00</b>	<b>SEE ATTRIBUTION BELOW</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734343

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 474 / 582
(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>JAMES S. CAMP</b>	Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>PO BOX 82575</b>	Transaction ID: <b>SA11.44348</b>
City <b>BAKERSFIELD</b> State <b>CA</b> Zip Code <b>93380-2575</b>	Amount of Each Receipt this Period <b>448.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>SA CAMP COMPANIES</b> Occupation <b>PRESIDENT</b>	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>448.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>RICHARD C. CAMP</b>	Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>8147 ELPHICK LN</b>	Transaction ID: <b>SA11.44349</b>
City <b>SEBASTOPOL</b> State <b>CA</b> Zip Code <b>95472-4762</b>	Amount of Each Receipt this Period <b>446.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b> Occupation <b>RETIRED</b>	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>446.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>CANDY HART GLENN</b>	Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>5105 WOODLAND WAY</b>	Transaction ID: <b>SA11.44352</b>
City <b>EUREKA</b> State <b>CA</b> Zip Code <b>95503-9702</b>	Amount of Each Receipt this Period <b>220.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b> Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>220.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

110320734837

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 475 / 582</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>DONALD M. HART, JR.</b>		Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>PO BOX 82575</b>		Transaction ID: <b>SA11.44353</b>
City <b>BAKERSFIELD</b>	State <b>CA</b>	Zip Code <b>93380-2575</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>220.00</b>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>220.00</b>	[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) <b>JANE CAMP MICKS</b>		Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>220 QUAIL VALLEY RD</b>		Transaction ID: <b>SA11.44350</b>
City <b>EUREKA</b>	State <b>CA</b>	Zip Code <b>95503-9531</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>446.00</b>
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>446.00</b>	[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) <b>NANCY HART SARAGE</b>		Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>805 E PEBBLE BEACH</b>		Transaction ID: <b>SA11.44351</b>
City <b>ASHLAND</b>	State <b>OR</b>	Zip Code <b>97520-3706</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>220.00</b>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>220.00</b>	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) .....	<b>0.00</b>
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 476 / 582			
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**BAPU FARMING COMPANY LLC**

Mailing Address **18704 AVENUE 19**

City **MADERA** State **CA** Zip Code **93637-9772**

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 13 / 2010**

Transaction ID: **SA11.39377**

Amount of Each Receipt this Period **500.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**CRS FARMING, LLC**

Mailing Address **11878 AVENUE 328**

City **VISALIA** State **CA** Zip Code **93291-9238**

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50837**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**SEE ATTRIBUTION BELOW**

**C.** Full Name (Last, First, Middle Initial)  
**JAYME SHANNON**

Mailing Address **11878 AVENUE 328**

City **VISALIA** State **CA** Zip Code **93291-9238**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 29 / 2010**

Transaction ID: **SA11.50907**

Amount of Each Receipt this Period **250.00**

**CONTRIBUTION**

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... **750.00**

**TOTAL** This Period (last page this line number only) .....

1002073433



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 477 / 582

(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**D.O.V.E.S. LLC**  
Mailing Address **P.O. BOX 73**

City **CLARINGTON** State **OH** Zip Code **43915-0073**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**20000.00**

Date of Receipt  
**09 / 28 / 2010**

Transaction ID: **SA11.49482**

Amount of Each Receipt this Period  
**20000.00**

CONTRIBUTION

ATTRIBUTION TO PARTNERS REQUESTED

**B.**

Full Name (Last, First, Middle Initial)  
**DANNA LAND CO., L.L.C.**  
Mailing Address **491 LYNDESEY LANE**

City **YUBA CITY** State **CA** Zip Code **95993-7802**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 16 / 2010**

Transaction ID: **SA11.42630**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

ATTRIBUTION TO PARTNERS REQUESTED

**C.**

Full Name (Last, First, Middle Initial)  
**DOUBLE J. FARMS**  
Mailing Address **P.O. BOX 398**

City **CORCORAN** State **CA** Zip Code **93212-0398**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2400.00**

Date of Receipt  
**09 / 09 / 2010**

Transaction ID: **SA11.36447**

Amount of Each Receipt this Period  
**2400.00**

CONTRIBUTION

SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional) ▶

**22650.00**

TOTAL This Period (last page this line number only) ▶

10020714840

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 478 / 582

(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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
**JIM HANSEN**  
Mailing Address **PO BOX 398**

Date of Receipt  
MM / DD / YYYY  
**09 / 09 / 2010**

City **CORCORAN** State **CA** Zip Code **93212-0398**

Transaction ID: **SA11.44344**

FEC ID number of contributing federal political committee. **C**

Amount of Each Receipt this Period  
**2400.00**

Name of Employer **DOUBLE J FARMS** Occupation **FARMER**

CONTRIBUTION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2400.00**

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
**GILKEY FIVE**  
Mailing Address **P.O. BOX 426**

Date of Receipt  
MM / DD / YYYY  
**08 / 31 / 2010**

City **CORCORAN** State **CA** Zip Code **93212-0426**

Transaction ID: **SA11.29772**

FEC ID number of contributing federal political committee. **C**

Amount of Each Receipt this Period  
**1000.00**

Name of Employer Occupation

CONTRIBUTION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

SEE ATTRIBUTION BELOW

**C.**

Full Name (Last, First, Middle Initial)  
**MR. BRENT GILKEY**  
Mailing Address **P.O. BOX 427**

Date of Receipt  
MM / DD / YYYY  
**08 / 31 / 2010**

City **CORCORAN** State **CA** Zip Code **93212-0427**

Transaction ID: **SA11.45032**

FEC ID number of contributing federal political committee. **C**

Amount of Each Receipt this Period  
**200.00**

Name of Employer **GILKEY FIVE** Occupation **AGRI-BUSINESS**

CONTRIBUTION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**200.00**

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶

**1000.00**

TOTAL This Period (last page this line number only) ▶

10020734841

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 479 / 582 (check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>MR. KIRK GILKEY</b>	Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>P.O. BOX 426</b>	Transaction ID: <b>SA11.45031</b>
City <b>CORCORAN</b> State <b>CA</b> Zip Code <b>93212-0426</b>	Amount of Each Receipt this Period <b>200.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>GILKEY FIVE</b> Occupation <b>AGRI-BUSINESS</b>	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>200.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. MATT GILKEY</b>	Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>P.O. BOX 395</b>	Transaction ID: <b>SA11.45033</b>
City <b>CORCORAN</b> State <b>CA</b> Zip Code <b>93212-0395</b>	Amount of Each Receipt this Period <b>200.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>GILKEY FIVE</b> Occupation <b>AGRI-BUSINESS</b>	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>200.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>MR. RALPH GILKEY</b>	Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>P.O. BOX 1062</b>	Transaction ID: <b>SA11.45030</b>
City <b>CORCORAN</b> State <b>CA</b> Zip Code <b>93212-1062</b>	Amount of Each Receipt this Period <b>200.00</b>
FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer <b>GILKEY FIVE</b> Occupation <b>AGRI-BUSINESS</b>	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>200.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734842

**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 480 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MR. STEVE GILKEY**

Mailing Address **P.O. BOX 426**

City **CORCORAN** State **CA** Zip Code **93212-0426**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GILKEY FIVE** Occupation **AGRI-BUSINESS**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.00**

Date of Receipt **08 / 31 / 2010**

Transaction ID: **SA11.45034**

Amount of Each Receipt this Period **200.00**

**CONTRIBUTION**

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**J.S.A. COMPANY**

Mailing Address **10457 VAN HORN ROAD**

City **BAKERSFIELD** State **CA** Zip Code **93313-9765**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 09 / 2010**

Transaction ID: **SA11.38756**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**SEE ATTRIBUTION BELOW**

**C.** Full Name (Last, First, Middle Initial)  
**J. STANLEY ANTONGIOVANNI**

Mailing Address **10457 VAN HORN RD.**

City **BAKERSFIELD** State **CA** Zip Code **93313-9765**

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 ▼ **1000.00**

Date of Receipt **09 / 09 / 2010**

Transaction ID: **SA11.44346**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... **1000.00**

**TOTAL** This Period (last page this line number only) .....

10020734

**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 481 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**JENSEN & JENSEN ATTORNEYS**

Mailing Address **1514 H. STREET**

City **MODESTO** State **CA** Zip Code **95354-2533**

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 09 / 2010**

Transaction ID: **SA11.38757**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**KERN RIDGE GROWERS, L.L.C.**

Mailing Address **P.O. BOX 455**

City **ARVIN** State **CA** Zip Code **93203-0455**

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **08 / 31 / 2010**

Transaction ID: **SA11.29771**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**SEE ATTRIBUTION BELOW**

**C.** Full Name (Last, First, Middle Initial)  
**MR. BOB GIRAGOSIAN**

Mailing Address **25429 BARBARA STREET**

City **ARVIN** State **CA** Zip Code **93203-9748**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KERN RIDGE GROWERS, LLC** Occupation **PACKER, SHIPPER, AND PRODUCER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **08 / 31 / 2010**

Transaction ID: **SA11.45035**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... **2000.00**

**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 482 / 582  
(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)  
CARLY VICTORY COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
LANGETWINS PARTNERSHIP

Mailing Address 1298 W. JAHANT ROAD

City ACAMPO State CA Zip Code 95220-9380

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 10 / 2010  
 Transaction ID: SA11.38922  
 Amount of Each Receipt this Period: 1000.00  
 CONTRIBUTION  
 ATTRIBUTION TO PARTNERS REQUESTED

**B.** Full Name (Last, First, Middle Initial)  
PEREZ FARMS

Mailing Address P.O. BOX 97

City CROWS LANDING State CA Zip Code 95313-0097

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 22 / 2010  
 Transaction ID: SA11.45289  
 Amount of Each Receipt this Period: 500.00  
 CONTRIBUTION  
 SEE ATTRIBUTION BELOW

**C.** Full Name (Last, First, Middle Initial)  
MR. EARL PEREZ

Mailing Address P.O. BOX 97

City CROWS LANDING State CA Zip Code 95313-0097

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PEREZ FARMS FARMER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 22 / 2010  
 Transaction ID: SA11.45292  
 Amount of Each Receipt this Period: 500.00  
 CONTRIBUTION  
 [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1500.00

TOTAL This Period (last page this line number only) ..... ▶

10020744845

**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 483 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>PEREZ FARMS</b>		Date of Receipt MM / DD / YYYY <b>09 / 22 / 2010</b>
Mailing Address <b>P.O. BOX 97</b>		Transaction ID: SA11.45290
City <b>CROWS LANDING</b>	State <b>CA</b>	Zip Code <b>95313-0097</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer	Occupation	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	<b>SEE ATTRIBUTION BELOW</b>

**B.**

Full Name (Last, First, Middle Initial) <b>MR. THOMAS PEREZ</b>		Date of Receipt MM / DD / YYYY <b>09 / 22 / 2010</b>
Mailing Address <b>P.O. BOX 97</b>		Transaction ID: SA11.45291
City <b>CROWS LANDING</b>	State <b>CA</b>	Zip Code <b>95313-0097</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>FARMERS</b>	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	<b>[MEMO ITEM]</b>

**C.**

Full Name (Last, First, Middle Initial) <b>PROSPECTOR L.L.C.</b>		Date of Receipt MM / DD / YYYY <b>09 / 03 / 2010</b>
Mailing Address <b>5213 W. MAIN STREET</b>		Transaction ID: SA11.33569
City <b>TURLOCK</b>	State <b>CA</b>	Zip Code <b>95380-9413</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>5000.00</b>
Name of Employer	Occupation	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>10000.00</b>	<b>SEE ATTRIBUTION BELOW</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734845

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 484 / 582  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
MR. MATTHEW R. SWANSON

Mailing Address 5213 W. MAIN STREET

City TURLOCK State CA Zip Code 95380-9413

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt MM / DD / YYYY  
09 / 03 / 2010

Transaction ID: SA11.44347

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
PROSPECTOR L.L.C.

Mailing Address 5213 W. MAIN STREET

City TURLOCK State CA Zip Code 95380-9413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt MM / DD / YYYY  
09 / 28 / 2010

Transaction ID: SA11.49483

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

SEE ATTRIBUTION BELOW

**C.** Full Name (Last, First, Middle Initial)  
MR. MATTHEW R. SWANSON

Mailing Address 5213 W. MAIN STREET

City TURLOCK State CA Zip Code 95380-9413

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt MM / DD / YYYY  
09 / 28 / 2010

Transaction ID: SA11.49921

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ..... ▶ 5000.00

TOTAL This Period (last page this line number only) ..... ▶

10020734347



**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 485 / 582
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>	15	<input type="checkbox"/>	12
<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
SIERRA VALLEY ALMONDS, L.L.C.

Mailing Address P.O. BOX 278

City **KERMAN** State **CA** Zip Code **93630-0278**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
09 / 20 / 2010

Transaction ID: SA11.43569

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

SEE ATTRIBUTION BELOW

**B.** Full Name (Last, First, Middle Initial)  
DEAN K. NELSON

Mailing Address 146 W. WARWICK

City **CLOVIS** State **CA** Zip Code **93619-3708**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SIERRA VALLEY ALMONDS OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
09 / 21 / 2010

Transaction ID: SA11.44343

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
STIRLING CAPITAL INVESTMENTS LLC

Mailing Address 27422 PORTOLA PKWY.  
SUITE 300

City **FOOTHILL RANCH** State **CA** Zip Code **92610-2833**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4800.00

Date of Receipt  
09 / 10 / 2010

Transaction ID: SA11.38921

Amount of Each Receipt this Period  
4800.00

CONTRIBUTION

ATTRIBUTION TO PARTNERS REQUESTED

SUBTOTAL of Receipts This Page (optional) ..... ▶ 5800.00

TOTAL This Period (last page this line number only) ..... ▶

1002073434

**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 486 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
TLC, A. CALIFORNIA PARTNERSHIP

Mailing Address 2822 S. MAPLE AVENUE

City FRESNO State CA Zip Code 93725-2207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 09 / 2010

Transaction ID: SA11.36446

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SEE ATTRIBUTION BELOW

**B.** Full Name (Last, First, Middle Initial)  
TALLEYRAND CLOUD

Mailing Address 2822 S. MAPLE AVE

City FRESNO State CA Zip Code 93725-2207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PAPER CONVERTERS PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 09 / 2010

Transaction ID: SA11.44345

Amount of Each Receipt this Period 500.00

CONTRIBUTION

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
WHEELER LIMITED PARTNERSHIP

Mailing Address P.O. BOX 10509

City BAKERSFIELD State CA Zip Code 93389-0509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 09 / 2010

Transaction ID: SA11.38755

Amount of Each Receipt this Period 2000.00

CONTRIBUTION

ATTRIBUTION TO PARTNERS REQUESTED

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2500.00

TOTAL This Period (last page this line number only) ..... ▶ 3916277.45

1002071413025

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 487 / 582  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**CARLY VICTORY COMMITTEE**

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>HATCH ELECTION COMMITTEE</b></p> <p>Mailing Address <b>175 S. WEST TEMPLE SUITE 650</b></p> <p>City <b>SALT LAKE CITY</b> State <b>UT</b> Zip Code <b>84101-1422</b></p> <p>FEC ID number of contributing federal political committee. <b>C C00104752</b></p> <p>Name of Employer _____ Occupation _____</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>4000.00</b></p>	<p>Date of Receipt <b>09 / 09 / 2010</b></p> <p>Transaction ID: SA11.38754</p> <p>Amount of Each Receipt this Period <b>4000.00</b></p> <p><b>CONTRIBUTION</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>KEVIN MCCARTHY FOR CONGRESS</b></p> <p>Mailing Address <b>P.O. BOX 12667</b></p> <p>City <b>BAKERSFIELD</b> State <b>CA</b> Zip Code <b>93389-2667</b></p> <p>FEC ID number of contributing federal political committee. <b>C C00420935</b></p> <p>Name of Employer _____ Occupation _____</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>2000.00</b></p>	<p>Date of Receipt <b>09 / 13 / 2010</b></p> <p>Transaction ID: SA11.39376</p> <p>Amount of Each Receipt this Period <b>2000.00</b></p> <p><b>CONTRIBUTION</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>21ST CENTURY MAJORITY FUND</b></p> <p>Mailing Address <b>6065 BOSWELL ROAD BOX 2274</b></p> <p>City <b>ATLANTA</b> State <b>GA</b> Zip Code <b>30328-4011</b></p> <p>FEC ID number of contributing federal political committee. <b>C C00361956</b></p> <p>Name of Employer _____ Occupation _____</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>5000.00</b></p>	<p>Date of Receipt <b>09 / 28 / 2010</b></p> <p>Transaction ID: SA11.49821</p> <p>Amount of Each Receipt this Period <b>5000.00</b></p> <p><b>CONTRIBUTION</b></p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶ <b>11000.00</b></p> <p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>	

10020734830

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 488 / 582

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) A. DUDA AND SONS, INC. PAC Mailing Address P.O. BOX 620257		Date of Receipt MM / DD / YYYY 09 / 02 / 2010
City OVIEDO	State FL	Zip Code 32762-0257
FEC ID number of contributing federal political committee. C C00213231		Transaction ID: SA11.33537 Amount of Each Receipt this Period 2400.00
Name of Employer Occupation		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 2400.00		
<b>B.</b> Full Name (Last, First, Middle Initial) AETNA, INC. PAC Mailing Address 151 FARMINGTON AVENUE #RE6A		Date of Receipt MM / DD / YYYY 09 / 13 / 2010
City HARTFORD	State CT	Zip Code 06156-0001
FEC ID number of contributing federal political committee. C C00181826		Transaction ID: SA11.39380 Amount of Each Receipt this Period 5000.00
Name of Employer Occupation		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 5000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) ALLIED GRAPE GROWERS FEDERAL PAC Mailing Address 7030 N. FRUIT AVENUE SUITE 115		Date of Receipt MM / DD / YYYY 09 / 03 / 2010
City FRESNO	State CA	Zip Code 93711-0782
FEC ID number of contributing federal political committee. C C00119388		Transaction ID: SA11.33562 Amount of Each Receipt this Period 2400.00
Name of Employer Occupation		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 2400.00		
SUBTOTAL of Receipts This Page (optional) .....		9800.00
TOTAL This Period (last page this line number only) .....		

1002074451

**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 489 / 582
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>BRIDGEPOINT EDUCATION INC. PAC.</b>		Date of Receipt MM / DD / YYYY <b>09 / 21 / 2010</b>
Mailing Address <b>13500 EVENING CREEK DRIVE SUITE 600</b>		Transaction ID: SA11.44129
City <b>SAN DIEGO</b>	State <b>CA</b>	Zip Code <b>92128-8125</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400.00</b>
Name of Employer	Occupation	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2400.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>CALIFORNIA INDEPENDENT PETROLEUM ASSOCIATION PAC</b>		Date of Receipt MM / DD / YYYY <b>08 / 31 / 2010</b>
Mailing Address <b>1112 I. STREET #350</b>		Transaction ID: SA11.29769
City <b>SACRAMENTO</b>	State <b>CA</b>	Zip Code <b>95814-2836</b>
FEC ID number of contributing federal political committee. <b>C C00318766</b>		Amount of Each Receipt this Period <b>5000.00</b>
Name of Employer	Occupation	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>5000.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>CALIFORNIA WESTSIDE FARMERS FED PAC</b>		Date of Receipt MM / DD / YYYY <b>09 / 08 / 2010</b>
Mailing Address <b>3938 N. WILSON AVENUE</b>		Transaction ID: SA11.36415
City <b>FRESNO</b>	State <b>CA</b>	Zip Code <b>93704-4136</b>
FEC ID number of contributing federal political committee. <b>C C00079566</b>		Amount of Each Receipt this Period <b>5000.00</b>
Name of Employer	Occupation	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>5000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>12400.00</b>
TOTAL This Period (last page this line number only) .....	

1002073432

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 490 / 582  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
CALIFORNIA CITRUS MUTUAL PAC

Mailing Address 512 N. KAWEAH AVENUE

City State Zip Code  
**EXETER CA 93221-1200**

FEC ID number of contributing federal political committee. **C C00166355**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36416

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
CALIFORNIA CITRUS MUTUAL PAC

Mailing Address 512 N. KAWEAH AVENUE

City State Zip Code  
**EXETER CA 93221-1200**

FEC ID number of contributing federal political committee. **C C00166355**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2010

Transaction ID: SA11.36417

Amount of Each Receipt this Period  
400.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
CHESAPEAKE ENERGY PAC

Mailing Address P.O. BOX 18576

City State Zip Code  
**OKLAHOMA CITY OK 73154-0576**

FEC ID number of contributing federal political committee. **C C00389288**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
MM / DD / YYYY  
09 / 02 / 2010

Transaction ID: SA11.33532

Amount of Each Receipt this Period  
10000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10900.00

**TOTAL** This Period (last page this line number only) ..... ►

10020734833

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 491 / 582
(check only one)	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**CKE RESTAURANTS PAC**

Mailing Address **6307 CARPINTERIA AVE  
SUITE A**

City **CARPINTERIA** State **CA** Zip Code **93013-2908**

FEC ID number of contributing federal political committee. **C C00461673**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **MM / DD / YYYY**  
**08 / 24 / 2010**

Transaction ID: **SA11.28180**

Amount of Each Receipt this Period **5000.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**COCA-COLA ENTERPRISES INC. PAC**

Mailing Address **P.O. BOX 723040**

City **ATLANTA** State **GA** Zip Code **31139-0040**

FEC ID number of contributing federal political committee. **C C00250134**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **MM / DD / YYYY**  
**09 / 27 / 2010**

Transaction ID: **SA11.49295**

Amount of Each Receipt this Period **5000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**COMMERCE BANCSHARES, INC., PAC**

Mailing Address **P.O. BOX 419248**

City **KANSAS CITY** State **MO** Zip Code **64141-6248**

FEC ID number of contributing federal political committee. **C C00072967**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **MM / DD / YYYY**  
**09 / 02 / 2010**

Transaction ID: **SA11.33533**

Amount of Each Receipt this Period **750.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **10750.00**

**TOTAL** This Period (last page this line number only) .....

10020734854

**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 492 / 582		
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
COTTON PAC

Mailing Address 1785 N. FINE AVENUE

City FRESNO State CA Zip Code 93727-1616

FEC ID number of contributing federal political committee. **C** C00250464

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 09 / 03 / 2010  
 Transaction ID: SA11.33565  
 Amount of Each Receipt this Period 1400.00

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
DEVON ENERGY CORPORATION PAC

Mailing Address 20 N. BROADWAY

City OKLAHOMA CITY State OK Zip Code 73102-8202

FEC ID number of contributing federal political committee. **C** C00354753

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 09 / 03 / 2010  
 Transaction ID: SA11.33563  
 Amount of Each Receipt this Period 4000.00

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
ENTERPRISE HOLDINGS, INC. PAC

Mailing Address 600 CORPORATE PARK DRIVE

City ST. LOUIS State MO Zip Code 63105-4204

FEC ID number of contributing federal political committee. **C** C00219642

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 09 / 02 / 2010  
 Transaction ID: SA11.33531  
 Amount of Each Receipt this Period 2600.00

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 8000.00

**TOTAL** This Period (last page this line number only) ..... ▶

10020734855



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 493 / 582  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) EUREKA PAC		Date of Receipt MM / DD / YYYY 09 / 10 / 2010
Mailing Address 7315 WISCONSIN AVENUE SUITE 705 E.		Transaction ID: SA11.38923
City BETHESDA	State MD	Zip Code 20814-3202
FEC ID number of contributing federal political committee. <b>C</b> C00390161		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) FARM CREDIT PAC		Date of Receipt MM / DD / YYYY 09 / 08 / 2010
Mailing Address 50 F. STREET NW SUITE 900		Transaction ID: SA11.36418
City WASHINGTON	State DC	Zip Code 20001-1530
FEC ID number of contributing federal political committee. <b>C</b> C00193631		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

**C.**

Full Name (Last, First, Middle Initial) FARMPAC		Date of Receipt MM / DD / YYYY 08 / 31 / 2010
Mailing Address 2300 RIVER PLAZA DRIVE		Transaction ID: SA11.29770
City SACRAMENTO	State CA	Zip Code 95833-3293
FEC ID number of contributing federal political committee. <b>C</b> C00041954		Amount of Each Receipt this Period 15000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

SUBTOTAL of Receipts This Page (optional) .....	18500.00
TOTAL This Period (last page this line number only) .....	

10020734844

**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 494 / 582
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>FLOWERS PAC</b>	Date of Receipt MM / DD / YYYY <b>09 / 13 / 2010</b>
Mailing Address <b>1919 FLOWERS CIRCLE</b>	Transaction ID: <b>SA11.39381</b>
City <b>THOMASVILLE</b> State <b>GA</b> Zip Code <b>31757-1137</b>	Amount of Each Receipt this Period <b>5000.00</b>
FEC ID number of contributing federal political committee. <b>C C00033555</b>	<b>CONTRIBUTION</b>
Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>5000.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>FRIANT WATER PAC</b>	Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
Mailing Address <b>32415 ROAD 138</b>	Transaction ID: <b>SA11.38766</b>
City <b>VISALIA</b> State <b>CA</b> Zip Code <b>93292-9380</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C C00244533</b>	<b>CONTRIBUTION</b>
Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>FRIENDS OF SNOWMOBILING PAC</b>	Date of Receipt MM / DD / YYYY <b>09 / 27 / 2010</b>
Mailing Address <b>1640 HASLETT ROAD SUITE 170</b>	Transaction ID: <b>SA11.49294</b>
City <b>HASLETT</b> State <b>MI</b> Zip Code <b>48840-8683</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C C00380196</b>	<b>CONTRIBUTION</b>
Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734857

**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 495 / 582
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>INDEPENDENT OIL PRODUCERS AGENCY</b>		Date of Receipt MM / DD / YYYY <b>09 / 09 / 2010</b>
Mailing Address <b>4600 AMERICAN AVENUE W. SUITE 201</b>		Transaction ID: <b>SA11.38765</b>
City <b>BAKERSFIELD</b>	State <b>CA</b>	Zip Code <b>93309-4064</b>
FEC ID number of contributing federal political committee. <b>C C00469924</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer	Occupation	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

**B.**

Full Name (Last, First, Middle Initial) <b>KIRKLAND &amp; ELLIS PAC</b>		Date of Receipt MM / DD / YYYY <b>09 / 29 / 2010</b>
Mailing Address <b>300 N. LA SALLE DRIVE 30TH FLOOR</b>		Transaction ID: <b>SA11.50790</b>
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60654-3406</b>
FEC ID number of contributing federal political committee. <b>C C00212142</b>		Amount of Each Receipt this Period <b>667.00</b>
Name of Employer	Occupation	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>667.00</b>	

**C.**

Full Name (Last, First, Middle Initial) <b>LAND O'LAKES PAC</b>		Date of Receipt MM / DD / YYYY <b>09 / 08 / 2010</b>
Mailing Address <b>P.O. BOX 64101</b>		Transaction ID: <b>SA11.36414</b>
City <b>SAINT PAUL</b>	State <b>MN</b>	Zip Code <b>55164-0101</b>
FEC ID number of contributing federal political committee. <b>C C00009423</b>		Amount of Each Receipt this Period <b>2500.00</b>
Name of Employer	Occupation	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3667.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

130207141

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 496 / 582
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**LOS ANGELES COUNTY LINCOLN CLUBS**

Mailing Address **50 E. FOOTHILL BLVD.  
FEDERAL PAC 3RD FLOOR**

City **ARCADIA** State **CA** Zip Code **91006-2314**

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **09 / 30 / 2010**

Transaction ID: **SA11.58747**

Amount of Each Receipt this Period **2500.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MAJORITY COMMITTEE PAC**

Mailing Address **P.O. BOX 10134**

City **BAKERSFIELD** State **CA** Zip Code **93389-0134**

FEC ID number of contributing federal political committee. **C C00428052**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **09 / 13 / 2010**

Transaction ID: **SA11.39379**

Amount of Each Receipt this Period **2500.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MCKENNA LONG & ALDRIDGE, LLP FEDERAL PAC**

Mailing Address **303 PEACHTREE STREET  
SUITE 5300**

City **ATLANTA** State **GA** Zip Code **30308-3265**

FEC ID number of contributing federal political committee. **C C00391383**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 28 / 2010**

Transaction ID: **SA11.49819**

Amount of Each Receipt this Period **1000.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **6000.00**

**TOTAL** This Period (last page this line number only) .....

1300207141702001

**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 497 / 582
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)  
**CARLY VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MURRAY ENERGY PAC**

Mailing Address **29325 CHAGRIN BLVD.  
SUITE 300**

City **PEPPER PIKE** State **OH** Zip Code **44122-4600**

FEC ID number of contributing federal political committee. **C C00410985**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **09 / 28 / 2010**

Transaction ID: **SA11.49820**

Amount of Each Receipt this Period **5000.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**NAHU PAC**

Mailing Address **P.O. BOX 20865**

City **INDIANAPOLIS** State **IN** Zip Code **46220-0865**

FEC ID number of contributing federal political committee. **C C00283135**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **09 / 24 / 2010**

Transaction ID: **SA11.48313**

Amount of Each Receipt this Period **5000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**RAISIN BARGAINING ASSOCIATION FED. PAC**

Mailing Address **1300 E. SHAW AVENUE  
SUITE 175**

City **FRESNO** State **CA** Zip Code **93710-7911**

FEC ID number of contributing federal political committee. **C C00128686**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **09 / 08 / 2010**

Transaction ID: **SA11.36419**

Amount of Each Receipt this Period **2400.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... **12400.00**

**TOTAL** This Period (last page this line number only) .....

10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 498 / 582  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) REPUBLICAN MAJORITY FUND</p> <p>Mailing Address P.O. BOX 144</p> <p>City State Zip Code ALEXANDRIA VA 22313-0144</p> <p>FEC ID number of contributing federal political committee. <b>C</b> C00296640</p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt MM / DD / YYYY 09 / 07 / 2010</p> <p>Transaction ID: SA11.35362</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>CONTRIBUTION</p>	
<p><b>B.</b> Full Name (Last, First, Middle Initial) SABRE PAC SABRELINER CORPORATION</p> <p>Mailing Address 7733 FORSYTH BLVD. SUITE 1500</p> <p>City State Zip Code CLAYTON MO 63105-1879</p> <p>FEC ID number of contributing federal political committee. <b>C</b> C00178053</p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 09 / 02 / 2010</p> <p>Transaction ID: SA11.33536</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION</p>	
<p><b>C.</b> Full Name (Last, First, Middle Initial) SECURITAS U.S.A. PAC</p> <p>Mailing Address 4330 PARK TERRACE DRIVE</p> <p>City State Zip Code WESTLAKE VILLAGE CA 91361-4630</p> <p>FEC ID number of contributing federal political committee. <b>C</b> C00380931</p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 09 / 29 / 2010</p> <p>Transaction ID: SA11.50789</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION</p>	
<p>SUBTOTAL of Receipts This Page (optional) ..... ▶</p>		<p>7000.00</p>
<p>TOTAL This Period (last page this line number only) ..... ▶</p>		<p></p>

1302074841

**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 499 / 582
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) <b>SMURFIT STONE PAC</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
Mailing Address <b>SIX CITY PLACE DRIVE</b>	Transaction ID: <b>SA11.33534</b>
City <b>CREVE COEUR</b> State <b>MO</b> Zip Code <b>63141-7157</b>	Amount of Each Receipt this Period <b>5000.00</b>
FEC ID number of contributing federal political committee. <b>C C00117424</b>	<b>CONTRIBUTION</b>
Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>5000.00</b>

**B.**

Full Name (Last, First, Middle Initial) <b>SUPAC</b>	Date of Receipt MM / DD / YYYY <b>09 / 03 / 2010</b>
Mailing Address <b>4141 E. BROADWAY ROAD</b>	Transaction ID: <b>SA11.33564</b>
City <b>PHOENIX</b> State <b>AZ</b> Zip Code <b>85040-8803</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C C00385831</b>	<b>CONTRIBUTION</b>
Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>

**C.**

Full Name (Last, First, Middle Initial) <b>UNIGROUP PAC</b>	Date of Receipt MM / DD / YYYY <b>09 / 02 / 2010</b>
Mailing Address <b>ONE PREMIER DRIVE</b>	Transaction ID: <b>SA11.33535</b>
City <b>FENTON</b> State <b>MO</b> Zip Code <b>63026-2989</b>	Amount of Each Receipt this Period <b>3000.00</b>
FEC ID number of contributing federal political committee. <b>C C00435909</b>	<b>CONTRIBUTION</b>
Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>3000.00</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>9000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1103072013432

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 500 / 582  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
WATSON LAND COMPANY EMPLOYEES PAC

Mailing Address 22010 S. WILMINGTON AVENUE  
WATSON EMPL. PAC

City CARSON State CA Zip Code 90745-4368

FEC ID number of contributing federal political committee. **C** C00107680

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: SA11.58746

Amount of Each Receipt this Period 2500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
WELLPOINT, INC., WELLPAC

Mailing Address 120 MONUMENT CIRCLE

City INDIANAPOLIS State IN Zip Code 46204-4906

FEC ID number of contributing federal political committee. **C** C00197228

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
09 / 02 / 2010

Transaction ID: SA11.33538

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
WENDYS/ ARBYS GROUP PAC

Mailing Address 4288 W. DUBLIN GRANVILLE ROAD

City DUBLIN State OH Zip Code 43017-1442

FEC ID number of contributing federal political committee. **C** C00369090

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
09 / 20 / 2010

Transaction ID: SA11.43571

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 12500.00

TOTAL This Period (last page this line number only) ..... ▶

10020734853



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 501 / 582
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
		<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) <b>ZIONS BANCORPORATION PAC</b>	Date of Receipt
	Mailing Address <b>310 SOUTH MAIN, SUITE 1420</b>	<input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City <b>SALT LAKE CITY</b> State <b>UT</b> Zip Code <b>84101-2116</b>	Transaction ID: <b>SA11.38753</b>
	FEC ID number of contributing federal political committee. <input type="text" value="C00275230"/>	Amount of Each Receipt this Period
	Name of Employer Occupation	<input type="text" value="2500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	CONTRIBUTION
	<input type="text" value="2500.00"/>	

SUBTOTAL of Receipts This Page (optional) .....	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only) .....	<input type="text" value="140917.00"/>

1002073434

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 502 / 582  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) American Airlines		Date of Receipt
Mailing Address 4333 Amon Carter Boulevard		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
City	State	Zip Code
Fort Worth	TX	76155
FEC ID number of contributing federal political committee.		Transaction ID: SA15-1
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="377.00"/>
Name of Employer	Occupation	Vendor Refund - Travel
Receipt For:	Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="377.70"/>	
<input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) Southwest Airlines		Date of Receipt
Mailing Address PO Box 36647-1CR		<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
City	State	Zip Code
Dallas	TX	75235
FEC ID number of contributing federal political committee.		Transaction ID: SA15-2
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="400.70"/>
Name of Employer	Occupation	Vendor Refund - Travel
Receipt For:	Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.70"/>	
<input type="checkbox"/> Other (specify) ▼		

**C.**

Full Name (Last, First, Middle Initial) United Airlines		Date of Receipt
Mailing Address PO Box 66100		<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
City	State	Zip Code
Chicago	IL	60666
FEC ID number of contributing federal political committee.		Transaction ID: SA15-3
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="363.70"/>
Name of Employer	Occupation	Vendor Refund - Travel
Receipt For:	Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="363.70"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	<input type="text" value="1141.40"/>
TOTAL This Period (last page this line number only) .....	<input type="text"/>

15  
14  
13  
12  
11  
10  
9  
8  
7  
6  
5  
4  
3  
2  
1



**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 504 / 582

<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)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) Carly for CA	Transaction ID: SB21B.36 Date of Disbursement 09 / 29 / 2010
	Mailing Address PO Box 710187	Amount of Each Disbursement this Period 2378.61
	City San Diego State CA Zip Code	
	Purpose of Disbursement Catering	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Caitlin Ashlock	Transaction ID: SB21B.35 Date of Disbursement 09 / 07 / 2010
	Mailing Address 487 Greenwich Street #3	Amount of Each Disbursement this Period 4300.00
	City San Francisco State CA Zip Code 94133	
	Purpose of Disbursement Graphic Design	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Paula Beckman	Transaction ID: SB21B.167 Date of Disbursement 09 / 13 / 2010
	Mailing Address PO Box 2097	Amount of Each Disbursement this Period 3559.22
	City Carmel State CA Zip Code 93921	
	Purpose of Disbursement Catering	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	10237.83
TOTAL This Period (last page this line number only) .....	

10020734867



**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 506 / 582						
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>William Lyon</b>	Transaction ID: <b>SB21B.164</b>	
	Date of Disbursement 09 / 13 / 2010	
Mailing Address <b>4490 Von Karman Ave</b>	Amount of Each Disbursement this Period <b>469.65</b>	
City <b>Newport Beach</b> State <b>CA</b> Zip Code <b>92660</b>	Purpose of Disbursement <b>Food/Beverage/Parking</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. Full Name (Last, First, Middle Initial) <b>Jenny Martin-Wong</b>	Transaction ID: <b>SB21B.162</b>	
	Date of Disbursement 09 / 29 / 2010	
Mailing Address <b>1718 Wellington Street</b>	Amount of Each Disbursement this Period <b>4744.24</b>	
City <b>Oakland</b> State <b>CA</b> Zip Code <b>94602</b>	Purpose of Disbursement <b>Catering</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. Full Name (Last, First, Middle Initial) <b>Jenny Martin-Wong</b>	Transaction ID: <b>SB21B.168</b>	
	Date of Disbursement 09 / 15 / 2010	
Mailing Address <b>1718 Wellington Street</b>	Amount of Each Disbursement this Period <b>4000.00</b>	
City <b>Oakland</b> State <b>CA</b> Zip Code <b>94602</b>	Purpose of Disbursement <b>Catering</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>9213.89</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073433

**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 507 / 582
<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b
<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) Crystal Rowland	Transaction ID: SB21B.166 Date of Disbursement 09 / 13 / 2010
	Mailing Address 909 North Sepulveda Boulevard Suite 210	Amount of Each Disbursement this Period 62.54
	City El Segundo State CA Zip Code 90245	
	Purpose of Disbursement Office Supplies Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CRYSTAL ROWLAND	Transaction ID: SB21B.45 Date of Disbursement 09 / 13 / 2010
	Mailing Address 909 N. Sepulveda Blvd	Amount of Each Disbursement this Period 62.54
	City El Segundo State CA Zip Code 90245	
	Purpose of Disbursement Office Supplies Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Holly Strother	Transaction ID: SB21B.170 Date of Disbursement 09 / 27 / 2010
	Mailing Address 358 North Sierra Bonita Ave	Amount of Each Disbursement this Period 100.00
	City Los Angeles State CA Zip Code 90036	
	Purpose of Disbursement Graphic Design Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	225.08
TOTAL This Period (last page this line number only) .....	

02 SEP 2007 14:37:00

**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 508 / 582

<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)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ace Parking	Transaction ID: SB21B.01
	Mailing Address 645 Ash Street	Date of Disbursement 09 / 13 / 2010
	City San Diego State CA Zip Code 92101	Amount of Each Disbursement this Period 375.00
	Purpose of Disbursement Parking Service	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Air Partner	Transaction ID: SB21B.02
	Mailing Address 1100 Lee Wagener Boulevard Suite 328	Date of Disbursement 09 / 21 / 2010
	City Fort Lauderdale State FL Zip Code 33315	Amount of Each Disbursement this Period 7751.00
	Purpose of Disbursement Travel	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Air Partner Inc.	Transaction ID: SB21B.03
	Mailing Address 1100 Lee Wagener Boulevard Suite 328	Date of Disbursement 08 / 23 / 2010
	City Fort Lauderdale State FL Zip Code 33315	Amount of Each Disbursement this Period 10415.00
	Purpose of Disbursement Travel	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	18541.00
TOTAL This Period (last page this line number only) .....	

10020734371



**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 509 / 582

<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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Air Partner Inc.		Transaction ID: SB21B.04 Date of Disbursement 08 / 27 / 2010
Mailing Address 1100 Lee Wagener Boulevard Suite 328		Amount of Each Disbursement this Period 10837.00
City Fort Lauderdale State FL Zip Code 33315	Category/ Type	
Purpose of Disbursement Travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>B.</b> Full Name (Last, First, Middle Initial) Air Partner Inc.		Transaction ID: SB21B.05 Date of Disbursement 09 / 10 / 2010
Mailing Address 1100 Lee Wagener Boulevard Suite 328		Amount of Each Disbursement this Period 72.60
City Fort Lauderdale State FL Zip Code 33315	Category/ Type	
Purpose of Disbursement Travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>C.</b> Full Name (Last, First, Middle Initial) Alan Decker Photography		Transaction ID: SB21B.06 Date of Disbursement 08 / 27 / 2010
Mailing Address 1142 Archer Street		Amount of Each Disbursement this Period 978.75
City San Diego State CA Zip Code 92109	Category/ Type	
Purpose of Disbursement Photography Service		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	11888.35
<b>TOTAL</b> This Period (last page this line number only) .....	[ ]

10020714872

**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 510 / 582

<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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Alan Decker Photography		Transaction ID: SB21B.07 Date of Disbursement 09 / 07 / 2010	
Mailing Address 1142 Archer Street		Amount of Each Disbursement this Period 978.75	
City San Diego	State CA	Zip Code 92109	Category/ Type
Purpose of Disbursement Photography Service		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>B.</b> Full Name (Last, First, Middle Initial) Alan Decker Photography		Transaction ID: SB21B.08 Date of Disbursement 09 / 07 / 2010	
Mailing Address 1142 Archer Street		Amount of Each Disbursement this Period 978.75	
City San Diego	State CA	Zip Code 92109	Category/ Type
Purpose of Disbursement Photography Service		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>C.</b> Full Name (Last, First, Middle Initial) American Airlines		Transaction ID: SB21B.09 Date of Disbursement 09 / 12 / 2010	
Mailing Address 4333 Amon Carter Boulevard		Amount of Each Disbursement this Period 153.70	
City Fort Worth	State TX	Zip Code 76155	Category/ Type
Purpose of Disbursement Travel		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	2111.20
TOTAL This Period (last page this line number only) .....	[ ]

10020734873

**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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) American Airlines  Mailing Address 4333 Amon Carter Boulevard  City Fort Worth State TX Zip Code 76155  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.10 Date of Disbursement 09 / 15 / 2010
	Amount of Each Disbursement this Period 124.70
	Category/ Type
	Disbursement For:
	Office Sought:

<b>B.</b> Full Name (Last, First, Middle Initial) American Airlines  Mailing Address 4333 Amon Carter Boulevard  City Fort Worth State TX Zip Code 76155  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.11 Date of Disbursement 09 / 16 / 2010
	Amount of Each Disbursement this Period 20.00
	Category/ Type
	Disbursement For:
	Office Sought:

<b>C.</b> Full Name (Last, First, Middle Initial) American Airlines  Mailing Address 4333 Amon Carter Boulevard  City Fort Worth State TX Zip Code 76155  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.12 Date of Disbursement 09 / 16 / 2010
	Amount of Each Disbursement this Period 223.40
	Category/ Type
	Disbursement For:
	Office Sought:

SUBTOTAL of Disbursements This Page (optional) ..... ▶	368.10
TOTAL This Period (last page this line number only) ..... ▶	[ ]

1002073487A

**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 512 / 582
<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b
<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: SB21B.13 Date of Disbursement
	Mailing Address 4333 Amon Carter Boulevard	<input type="text" value="09"/> <input type="text" value="M"/> / <input type="text" value="16"/> <input type="text" value="D"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="Y"/>
	City Fort Worth State TX Zip Code 76155	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel	<input type="text" value="334.70"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: SB21B.14 Date of Disbursement
	Mailing Address 4333 Amon Carter Boulevard	<input type="text" value="09"/> <input type="text" value="M"/> / <input type="text" value="16"/> <input type="text" value="D"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="Y"/>
	City Fort Worth State TX Zip Code 76155	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel	<input type="text" value="443.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: SB21B.15 Date of Disbursement
	Mailing Address 4333 Amon Carter Boulevard	<input type="text" value="09"/> <input type="text" value="M"/> / <input type="text" value="15"/> <input type="text" value="D"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="Y"/>
	City Fort Worth State TX Zip Code 76155	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel	<input type="text" value="377.70"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	<input type="text" value="1155.80"/>
TOTAL This Period (last page this line number only) .....	<input type="text"/>

10020734875

**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 513 / 582					
<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
	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)  
CARLY VICTORY COMMITTEE

A. Full Name (Last, First, Middle Initial) American Airlines		Transaction ID: SB21B.16 Date of Disbursement	
Mailing Address 4333 Amon Carter Boulevard		09 / 15 / 2010	
City Fort Worth State TX Zip Code 76155		Amount of Each Disbursement this Period	
Purpose of Disbursement Travel		58.70	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

B. Full Name (Last, First, Middle Initial) American Airlines		Transaction ID: SB21B.17 Date of Disbursement	
Mailing Address 4333 Amon Carter Boulevard		09 / 15 / 2010	
City Fort Worth State TX Zip Code 76155		Amount of Each Disbursement this Period	
Purpose of Disbursement Travel		377.70	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

C. Full Name (Last, First, Middle Initial) American Express		Transaction ID: SB.88888-1 Date of Disbursement	
Mailing Address PO Box 360001		09 / 16 / 2010	
City Fort Lauderdale State FL Zip Code 33336		Amount of Each Disbursement this Period	
Purpose of Disbursement Credit Card Payment		4702.02	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) .....	5138.42
TOTAL This Period (last page this line number only) .....	

10020734879

**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 514 / 582

<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
	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)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) Delta Airlines	Transaction ID: SB.88888-3
	Mailing Address PO Box 20706	Date of Disbursement 09 / 16 / 2010
	City Atlanta State GA Zip Code 30320	Amount of Each Disbursement this Period 1272.74
	Purpose of Disbursement Travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Four Seasons Hotel	Transaction ID: SB.88888-6
	Mailing Address 1250 Channel Drive	Date of Disbursement 09 / 16 / 2010
	City Santa Barbara State CA Zip Code 93108	Amount of Each Disbursement this Period 2319.96
	Purpose of Disbursement Travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Omni Hotel	Transaction ID: SB.88888-5
	Mailing Address 420 Decker Drive	Date of Disbursement 09 / 16 / 2010
	City Irving State TX Zip Code 75062	Amount of Each Disbursement this Period 264.20
	Purpose of Disbursement Travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	3856.90
TOTAL This Period (last page this line number only) .....	

13020734877

**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 515 / 582

<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
	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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Southwest Airlines		Transaction ID: SB.88888-4 Date of Disbursement 09 / 16 / 2010
Mailing Address PO Box 36647-1CR		Amount of Each Disbursement this Period 618.40
City Dallas State TX Zip Code 75235	Purpose of Disbursement Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>B.</b> Full Name (Last, First, Middle Initial) US Airways		Transaction ID: SB.88888-2 Date of Disbursement 09 / 16 / 2010
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 226.72
City Phoenix State AZ Zip Code 85034	Purpose of Disbursement Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>C.</b> Full Name (Last, First, Middle Initial) American Express		Transaction ID: SB21B.18 Date of Disbursement 09 / 01 / 2010
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 4.95
City Phoenix State AZ Zip Code 85072	Purpose of Disbursement Credit Card Merchant Fee	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	850.07
TOTAL This Period (last page this line number only) .....	

10020734378

**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 516 / 582						
	<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

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

A. Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.19	
	Date of Disbursement 09 / 07 / 2010	
Mailing Address PO Box 53852	Amount of Each Disbursement this Period 8310.46	
City Phoenix State AZ Zip Code 85072	Purpose of Disbursement Credit Card Merchant Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.20	
	Date of Disbursement 09 / 10 / 2010	
Mailing Address PO Box 53852	Amount of Each Disbursement this Period 1250.00	
City Phoenix State AZ Zip Code 85072	Purpose of Disbursement Credit Card Merchant Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. Full Name (Last, First, Middle Initial) Avalon Transportation	Transaction ID: SB21B.21	
	Date of Disbursement 09 / 22 / 2010	
Mailing Address 366 Industrial Way	Amount of Each Disbursement this Period 153.60	
City San Francisco State CA Zip Code 94102	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	9714.06
TOTAL This Period (last page this line number only) .....	

10020734873



**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 517 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) Bank Card Center	Transaction ID: SB.101010-1 Date of Disbursement 08 / 27 / 2010
	Mailing Address PO Box 569200	Amount of Each Disbursement this Period 7943.64
	City Dallas   State TX   Zip Code 75356	
	Purpose of Disbursement Credit Card Payment	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State:   District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AirTran	Transaction ID: SB.101010-6 Date of Disbursement 08 / 27 / 2010
	Mailing Address 200 Glen Eagles Court	Amount of Each Disbursement this Period 220.40
	City Carrollton   State GA   Zip Code 30117	
	Purpose of Disbursement Travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State:   District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Cheaptickets.com	Transaction ID: SB.101010-8 Date of Disbursement 08 / 27 / 2010
	Mailing Address 1440 Kapiolani Boulevard Ste 800	Amount of Each Disbursement this Period 284.40
	City Honolulu   State HI   Zip Code 96814	
	Purpose of Disbursement Travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State:   District:	<input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>8448.44</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10  
00  
00  
04  
11  
17  
10  
10  
10  
11

**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 518 / 582				
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
Cheaptickets.com

Mailing Address 1440 Kapiolani Boulevard  
Ste 800

City Honolulu State HI Zip Code 96814

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB.101010-9  
Date of Disbursement 08 / 27 / 2010

Amount of Each Disbursement this Period  
204.40

Category/Type

**B.**

Full Name (Last, First, Middle Initial)  
Orbitz.com

Mailing Address 500 West Madison Street  
Ste 1000

City Chicago State IL Zip Code 60661

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB.101010-7  
Date of Disbursement 08 / 27 / 2010

Amount of Each Disbursement this Period  
1411.58

Category/Type

**C.**

Full Name (Last, First, Middle Initial)  
Rincon Catering, Inc.

Mailing Address 500 Ninos Drive

City Santa Barbara State CA Zip Code 93103

Purpose of Disbursement Catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB.101010-5  
Date of Disbursement 08 / 27 / 2010

Amount of Each Disbursement this Period  
4164.54

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 5780.52

**TOTAL** This Period (last page this line number only) ..... ▶

1002071431

**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 519 / 582
<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b
<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) Ritz-Carlton Highlands	Transaction ID: SB.101010-10
	Mailing Address 13031 Ritz-Carlton Highlands Ct	Date of Disbursement 08 / 27 / 2010
	City Truckee State CA Zip Code 96161	Amount of Each Disbursement this Period 944.82
	Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

B.	Full Name (Last, First, Middle Initial) Southwest Air	Transaction ID: SB.101010-3
	Mailing Address PO Box 36647-1CR	Date of Disbursement 08 / 27 / 2010
	City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period 210.70
	Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

C.	Full Name (Last, First, Middle Initial) Southwest Air	Transaction ID: SB.101010-4
	Mailing Address PO Box 36647-1CR	Date of Disbursement 08 / 27 / 2010
	City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period 171.40
	Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) .....	1326.92
TOTAL This Period (last page this line number only) .....	

10020734332

**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 520 / 582
<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b
<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>US Airways</b>	Transaction ID: <b>SB.101010-2</b>
	Date of Disbursement <b>08 / 27 / 2010</b>
Mailing Address <b>4000 E. Sky Harbor Blvd</b>	Amount of Each Disbursement this Period <b>331.40</b>
City <b>Phoenix</b> State <b>AZ</b> Zip Code <b>85034</b>	
Purpose of Disbursement <b>Travel</b>	Category/ Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

B. Full Name (Last, First, Middle Initial) <b>Bank Card Center</b>	Transaction ID: <b>SB.9999-1</b>
	Date of Disbursement <b>09 / 25 / 2010</b>
Mailing Address <b>PO Box 569200</b>	Amount of Each Disbursement this Period <b>9539.87</b>
City <b>Dallas</b> State <b>TX</b> Zip Code <b>75356</b>	
Purpose of Disbursement <b>Credit Card Payment</b>	Category/ Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

C. Full Name (Last, First, Middle Initial) <b>American Airlines</b>	Transaction ID: <b>SB.9999-2</b>
	Date of Disbursement <b>09 / 25 / 2010</b>
Mailing Address <b>4333 Amon Carter Boulevard</b>	Amount of Each Disbursement this Period <b>152.70</b>
City <b>Fort Worth</b> State <b>TX</b> Zip Code <b>76155</b>	
Purpose of Disbursement <b>Travel</b>	Category/ Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	<b>10023.97</b>
TOTAL This Period (last page this line number only) .....	

1002073483

**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 521 / 582
<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b
<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: SB.9999-3 Date of Disbursement
	Mailing Address 4333 Amon Carter Boulevard	<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City Fort Worth State TX Zip Code 76155	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel	<input type="text" value="157.70"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: SB.9999-4 Date of Disbursement
	Mailing Address 4333 Amon Carter Boulevard	<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City Fort Worth State TX Zip Code 76155	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel	<input type="text" value="385.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: SB.9999-5 Date of Disbursement
	Mailing Address 4333 Amon Carter Boulevard	<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City Fort Worth State TX Zip Code 76155	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel	<input type="text" value="481.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	<input type="text" value="1023.70"/>
TOTAL This Period (last page this line number only) .....	<input type="text"/>

10020734

**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 522 / 582					
<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
	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)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) Avalon Transportation	Transaction ID: SB.9999-10
	Mailing Address 366 Industrial Way	Date of Disbursement 09 / 25 / 2010
	City San Francisco State CA Zip Code 94102	Amount of Each Disbursement this Period 142.80
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Avalon Transportation	Transaction ID: SB.9999-11
	Mailing Address 366 Industrial Way	Date of Disbursement 09 / 25 / 2010
	City San Francisco State CA Zip Code 94102	Amount of Each Disbursement this Period 147.80
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Avalon Transportation	Transaction ID: SB.9999-12
	Mailing Address 366 Industrial Way	Date of Disbursement 09 / 25 / 2010
	City San Francisco State CA Zip Code 94102	Amount of Each Disbursement this Period 147.80
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	438.40
TOTAL This Period (last page this line number only) .....	

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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)	PAGE 523 / 582
<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b
<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Avalon Transportation	Transaction ID: SB.9999-6 Date of Disbursement 09 / 25 / 2010
	Mailing Address 366 Industrial Way	Amount of Each Disbursement this Period 112.80
	City San Francisco State CA Zip Code 94102	
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b>	Full Name (Last, First, Middle Initial) Avalon Transportation	Transaction ID: SB.9999-7 Date of Disbursement 09 / 25 / 2010
	Mailing Address 366 Industrial Way	Amount of Each Disbursement this Period 114.80
	City San Francisco State CA Zip Code 94102	
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b>	Full Name (Last, First, Middle Initial) Avalon Transportation	Transaction ID: SB.9999-8 Date of Disbursement 09 / 25 / 2010
	Mailing Address 366 Industrial Way	Amount of Each Disbursement this Period 126.40
	City San Francisco State CA Zip Code 94102	
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	354.00
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734833

**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)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) Avalon Transportation	Transaction ID: SB.9999-9
	Mailing Address 366 Industrial Way	Date of Disbursement 09 / 25 / 2010
	City San Francisco State CA Zip Code 94102	Amount of Each Disbursement this Period 126.40
	Purpose of Disbursement Travel	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Canyons Resort Lodging	Transaction ID: SB.9999-13
	Mailing Address 4000 The Canyons Resort Drive	Date of Disbursement 09 / 25 / 2010
	City Park City State UT Zip Code 84098	Amount of Each Disbursement this Period 133.23
	Purpose of Disbursement Travel	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Canyons Resort Lodging	Transaction ID: SB.9999-14
	Mailing Address 4000 The Canyons Resort Drive	Date of Disbursement 09 / 25 / 2010
	City Park City State UT Zip Code 84098	Amount of Each Disbursement this Period 133.23
	Purpose of Disbursement Travel	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	392.86
TOTAL This Period (last page this line number only) .....	

10020734887



**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 525 / 582					
<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
	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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Delta Airlines		Transaction ID: SB.9999-15 Date of Disbursement 09 / 25 / 2010	
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 714.70	
City Atlanta State GA Zip Code 30320	Purpose of Disbursement Travel		
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) Delta Airlines		Transaction ID: SB.9999-16 Date of Disbursement 09 / 25 / 2010	
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 745.83	
City Atlanta State GA Zip Code 30320	Purpose of Disbursement Travel		
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) Federal Express		Transaction ID: SB.9999-17 Date of Disbursement 09 / 25 / 2010	
Mailing Address 942 South Shady Grove Road		Amount of Each Disbursement this Period 240.00	
City Memphis State TN Zip Code 38120	Purpose of Disbursement Travel		
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ..... ▶	1700.53
TOTAL This Period (last page this line number only) ..... ▶	

1002071488

**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 526 / 582
<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b
<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) Four Seasons Hotels	Transaction ID: SB.9999-18
	Mailing Address 1250 Channel Drive	Date of Disbursement 09 / 25 / 2010
	City Santa Barbara State CA Zip Code 93108	Amount of Each Disbursement this Period 76.71
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Four Seasons Hotels	Transaction ID: SB.9999-19
	Mailing Address 1250 Channel Drive	Date of Disbursement 09 / 25 / 2010
	City Santa Barbara State CA Zip Code 93108	Amount of Each Disbursement this Period 385.28
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Hilton Hotels	Transaction ID: SB.9999-20
	Mailing Address 7930 Jones Branch Drive Suite 1100	Date of Disbursement 09 / 25 / 2010
	City McLean State VA Zip Code 22102	Amount of Each Disbursement this Period 169.69
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>631.68</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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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)

PAGE 528 / 582

<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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Hilton Hotels		Transaction ID: SB.9999-24 Date of Disbursement 09 / 25 / 2010
Mailing Address 7930 Jones Branch Drive Suite 1100		Amount of Each Disbursement this Period 266.61
City McLean State VA Zip Code 22102	Category/ Type	
Purpose of Disbursement Travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>B.</b> Full Name (Last, First, Middle Initial) Hyatt Hotels		Transaction ID: SB.9999-25 Date of Disbursement 09 / 25 / 2010
Mailing Address 71 South Wacker Drive 12th Floor		Amount of Each Disbursement this Period 28.38
City Chicago State IL Zip Code 60606	Category/ Type	
Purpose of Disbursement Travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>C.</b> Full Name (Last, First, Middle Initial) Hyatt Hotels		Transaction ID: SB.9999-26 Date of Disbursement 09 / 25 / 2010
Mailing Address 71 South Wacker Drive 12th Floor		Amount of Each Disbursement this Period 35.24
City Chicago State IL Zip Code 60606	Category/ Type	
Purpose of Disbursement Travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	330.23
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

10020734891

**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 529 / 582			
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) Hyatt Hotels	Transaction ID: SB.9999-27
	Mailing Address 71 South Wacker Drive 12th Floor	Date of Disbursement 09 / 25 / 2010
	City Chicago State IL Zip Code 60606	Amount of Each Disbursement this Period 149.57
	Purpose of Disbursement Travel	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Hyatt Hotels	Transaction ID: SB.9999-28
	Mailing Address 71 South Wacker Drive 12th Floor	Date of Disbursement 09 / 25 / 2010
	City Chicago State IL Zip Code 60606	Amount of Each Disbursement this Period 241.03
	Purpose of Disbursement Travel	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Hyatt Hotels	Transaction ID: SB.9999-29
	Mailing Address 71 South Wacker Drive 12th Floor	Date of Disbursement 09 / 25 / 2010
	City Chicago State IL Zip Code 60606	Amount of Each Disbursement this Period 241.03
	Purpose of Disbursement Travel	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	631.63
TOTAL This Period (last page this line number only) .....	

1002074302

**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 530 / 582
<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b
<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB.9999-30 Date of Disbursement 09 / 25 / 2010
	Mailing Address PO Box 36647-1CR	Amount of Each Disbursement this Period 171.70
	City Dallas State TX Zip Code 75235	
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB.9999-31 Date of Disbursement 09 / 25 / 2010
	Mailing Address PO Box 36647-1CR	Amount of Each Disbursement this Period 171.70
	City Dallas State TX Zip Code 75235	
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB.9999-32 Date of Disbursement 09 / 25 / 2010
	Mailing Address PO Box 36647-1CR	Amount of Each Disbursement this Period 171.70
	City Dallas State TX Zip Code 75235	
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	515.10
TOTAL This Period (last page this line number only) .....	

1002074433

**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 531 / 582

<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)  
CARLY VICTORY COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address PO Box 36647-1CR</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel</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>Transaction ID: SB.9999-33 Date of Disbursement 09 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 222.70</p>	
<p><b>B.</b> Full Name (Last, First, Middle Initial) Townsend Hotel</p> <p>Mailing Address 100 Townsend Street</p> <p>City Birmingham State MI Zip Code 48009</p> <p>Purpose of Disbursement Travel</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>Transaction ID: SB.9999-34 Date of Disbursement 09 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 7.95</p>	
<p><b>C.</b> Full Name (Last, First, Middle Initial) Townsend Hotel</p> <p>Mailing Address 100 Townsend Street</p> <p>City Birmingham State MI Zip Code 48009</p> <p>Purpose of Disbursement Travel</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>Transaction ID: SB.9999-35 Date of Disbursement 09 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 16.96</p>	
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶</p>		<p>247.61</p>
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>		<p></p>

100207430

**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 532 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) Townsend Hotel	Transaction ID: SB.9999-36 Date of Disbursement 09 / 25 / 2010
	Mailing Address 100 Townsend Street	Amount of Each Disbursement this Period 312.08
	City Birmingham State MI Zip Code 48009	
	Purpose of Disbursement Travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Townsend Hotel	Transaction ID: SB.9999-37 Date of Disbursement 09 / 25 / 2010
	Mailing Address 100 Townsend Street	Amount of Each Disbursement this Period 337.18
	City Birmingham State MI Zip Code 48009	
	Purpose of Disbursement Travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Townsend Hotel	Transaction ID: SB.9999-38 Date of Disbursement 09 / 25 / 2010
	Mailing Address 100 Townsend Street	Amount of Each Disbursement this Period 509.13
	City Birmingham State MI Zip Code 48009	
	Purpose of Disbursement Travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1158.39</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10  
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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)				PAGE 533 / 582					
<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
	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)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: SB.9999-39
	Mailing Address PO Box 66100	Date of Disbursement 09 / 25 / 2010
	City Chicago State IL Zip Code 60666	Amount of Each Disbursement this Period 217.70
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: SB.9999-40
	Mailing Address PO Box 66100	Date of Disbursement 09 / 25 / 2010
	City Chicago State IL Zip Code 60666	Amount of Each Disbursement this Period 217.70
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: SB.9999-41
	Mailing Address PO Box 66100	Date of Disbursement 09 / 25 / 2010
	City Chicago State IL Zip Code 60666	Amount of Each Disbursement this Period 852.70
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1288.10</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

100207 202001

**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 534 / 582					
<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
	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)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) Barkley Executive Services		Transaction ID: SB21B.22	
	Mailing Address PO Box 5540		Date of Disbursement 08 / 27 / 2010	
	City Yuma	State AZ	Zip Code 85366	Amount of Each Disbursement this Period 2700.00
	Purpose of Disbursement Travel		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:		

B.	Full Name (Last, First, Middle Initial) BB&T		Transaction ID: SB21B.23	
	Mailing Address 300 South Washington Street		Date of Disbursement 08 / 23 / 2010	
	City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 30.00
	Purpose of Disbursement Bank Fee		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:		

C.	Full Name (Last, First, Middle Initial) BB&T		Transaction ID: SB21B.24	
	Mailing Address 300 South Washington Street		Date of Disbursement 08 / 25 / 2010	
	City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 94.37
	Purpose of Disbursement Bank Fee		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2824.37
<b>TOTAL</b> This Period (last page this line number only) .....	

10020754897

**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)  
**CARLY VICTORY COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
BB&T

Mailing Address 300 South Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.25  
Date of Disbursement  
09 / 21 / 2010

Amount of Each Disbursement this Period  
66.00

**B.**

Full Name (Last, First, Middle Initial)  
BB&T

Mailing Address 300 South Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.26  
Date of Disbursement  
09 / 21 / 2010

Amount of Each Disbursement this Period  
62.00

**C.**

Full Name (Last, First, Middle Initial)  
BB&T

Mailing Address 300 South Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.27  
Date of Disbursement  
08 / 25 / 2010

Amount of Each Disbursement this Period  
48.72

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 176.72

**TOTAL** This Period (last page this line number only) ..... ▶

10020734



**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 537 / 582						
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.31 Date of Disbursement
	Mailing Address 300 South Washington Street	<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="29.45"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.32 Date of Disbursement
	Mailing Address 300 South Washington Street	<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="94.37"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.33 Date of Disbursement
	Mailing Address 300 South Washington Street	<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="89.50"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	<input type="text" value="213.32"/>
TOTAL This Period (last page this line number only) .....	<input type="text"/>

10020734300

**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 538 / 582						
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) <b>BB&amp;T</b>	Transaction ID: <b>SB21B.34</b>
	Mailing Address <b>300 South Washington Street</b>	Date of Disbursement <b>09 / 21 / 2010</b>
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314</b>
Purpose of Disbursement Bank Fee	<input type="checkbox"/>	Amount of Each Disbursement this Period <b>66.00</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

B.	Full Name (Last, First, Middle Initial) <b>City Club on Bunker Hill</b>	Transaction ID: <b>SB21B.37</b>
	Mailing Address <b>335 S. Grand Avenue</b>	Date of Disbursement <b>08 / 08 / 1946</b>
City <b>Los Angeles</b>	State <b>CA</b>	Zip Code _____
Purpose of Disbursement Catering	<input type="checkbox"/>	Amount of Each Disbursement this Period <b>2095.40</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

C.	Full Name (Last, First, Middle Initial) <b>CMDI</b>	Transaction ID: <b>SB21B.38</b>
	Mailing Address <b>7704 Leesburg Pike</b>	Date of Disbursement <b>09 / 07 / 2010</b>
City <b>Falls Church</b>	State <b>VA</b>	Zip Code <b>22043</b>
Purpose of Disbursement Batching/Caging	<input type="checkbox"/>	Amount of Each Disbursement this Period <b>1500.00</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3661.40</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734901

**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 539 / 582					
<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
	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)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>CMDI</b>		Transaction ID: <b>SB21B.39</b>	
Mailing Address <b>7704 Leesburg Pike</b>		Date of Disbursement 09 / 27 / 2010	
City <b>Falls Church</b> State <b>VA</b> Zip Code <b>22043</b>		Amount of Each Disbursement this Period 73.40	
Purpose of Disbursement Batching/Caging		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

B. Full Name (Last, First, Middle Initial) <b>Compliance Consulting Co. of VA LLC</b>		Transaction ID: <b>SB21B.40</b>	
Mailing Address <b>PO Box 365</b>		Date of Disbursement 09 / 03 / 2010	
City <b>McLean</b> State <b>VA</b> Zip Code <b>22101</b>		Amount of Each Disbursement this Period 4000.00	
Purpose of Disbursement Compliance Consulting		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

C. Full Name (Last, First, Middle Initial) <b>Continental Caterers</b>		Transaction ID: <b>SB21B.41</b>	
Mailing Address <b>918 Industrial Ave</b>		Date of Disbursement 09 / 15 / 2010	
City <b>Palo Alto</b> State <b>CA</b> Zip Code <b>94303</b>		Amount of Each Disbursement this Period 4000.00	
Purpose of Disbursement Catering		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	<b>8073.40</b>
TOTAL This Period (last page this line number only) .....	

10020734002

**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 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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Continental Caterers		Transaction ID: SB21B.42 Date of Disbursement 09 / 27 / 2010
Mailing Address 918 Industrial Ave		Amount of Each Disbursement this Period 4506.83
City Palo Alto State CA Zip Code 94303	Purpose of Disbursement Catering Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type
<b>B.</b> Full Name (Last, First, Middle Initial) Corporate Aviation Services		Transaction ID: SB21B.43 Date of Disbursement 09 / 27 / 2010
Mailing Address 29325 Chagrin Blvd Suite 300		Amount of Each Disbursement this Period 3080.00
City Beachwood State OH Zip Code 44122	Purpose of Disbursement Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type
<b>C.</b> Full Name (Last, First, Middle Initial) Corporate Impressions LA, Inc.		Transaction ID: SB21B.44 Date of Disbursement 09 / 24 / 2010
Mailing Address 10742 Burbank Boulevard		Amount of Each Disbursement this Period 396.00
City North Hollywood State CA Zip Code 91601	Purpose of Disbursement Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) .....	7982.83
TOTAL This Period (last page this line number only) .....	[ ]

1002073400



**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 541 / 582

<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)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) Data Mailing Systems, Inc.	Transaction ID: SB21B.46 Date of Disbursement 08 / 23 / 2010
	Mailing Address PO Box 13112	Amount of Each Disbursement this Period 788.42
	City Sacramento State CA Zip Code 95811	
	Purpose of Disbursement Printing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Delta	Transaction ID: SB21B.47 Date of Disbursement 09 / 13 / 2010
	Mailing Address PO Box 20706	Amount of Each Disbursement this Period 451.70
	City Atlanta State GA Zip Code 30320	
	Purpose of Disbursement Travel	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Delta	Transaction ID: SB21B.48 Date of Disbursement 09 / 16 / 2010
	Mailing Address PO Box 20706	Amount of Each Disbursement this Period 270.70
	City Atlanta State GA Zip Code 30320	
	Purpose of Disbursement Travel	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	1510.82
TOTAL This Period (last page this line number only) .....	

10020734304

**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 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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
Delta

Transaction ID: SB21B.49

Date of Disbursement

09 / 15 / 2010

Mailing Address PO Box 20706

Amount of Each Disbursement this Period

297.70

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
Delta

Transaction ID: SB21B.50

Date of Disbursement

09 / 15 / 2010

Mailing Address PO Box 20706

Amount of Each Disbursement this Period

362.40

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
Delta

Transaction ID: SB21B.51

Date of Disbursement

09 / 15 / 2010

Mailing Address PO Box 20706

Amount of Each Disbursement this Period

451.70

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1111.80

TOTAL This Period (last page this line number only) ▶

1002073433

**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)  
 21b  22  23  24  25  26  
 27  28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Direct Mail Center

Transaction ID: SB21B.52  
Date of Disbursement  
09 / 07 / 2010

Mailing Address 1099 Mariposa St

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Printing/Postage

Candidate Name

Amount of Each Disbursement this Period  
1837.52

Category/Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

**B.** Full Name (Last, First, Middle Initial)  
Direct Mail Center

Transaction ID: SB21B.53  
Date of Disbursement  
09 / 07 / 2010

Mailing Address 1099 Mariposa St

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Printing/Postage

Candidate Name

Amount of Each Disbursement this Period  
3109.13

Category/Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

**C.** Full Name (Last, First, Middle Initial)  
Direct Mail Center

Transaction ID: SB21B.54  
Date of Disbursement  
09 / 07 / 2010

Mailing Address 1099 Mariposa St

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Printing/Postage

Candidate Name

Amount of Each Disbursement this Period  
2727.64

Category/Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 7674.29

TOTAL This Period (last page this line number only) ..... ▶

10020734005

**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 544 / 582					
<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
	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)  
CARLY VICTORY COMMITTEE

A. Full Name (Last, First, Middle Initial) Direct Mail Center		Transaction ID: SB21B.55 Date of Disbursement	
Mailing Address 1099 Mariposa St		09 / 07 / 2010	
City San Francisco State CA Zip Code 94107		Amount of Each Disbursement this Period	
Purpose of Disbursement Printing/Postage		483.08	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

B. Full Name (Last, First, Middle Initial) Direct Mail Center		Transaction ID: SB21B.56 Date of Disbursement	
Mailing Address 1099 Mariposa St		09 / 15 / 2010	
City San Francisco State CA Zip Code 94107		Amount of Each Disbursement this Period	
Purpose of Disbursement Printing/Postage		6244.93	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

C. Full Name (Last, First, Middle Initial) Elavon		Transaction ID: SB21B.57 Date of Disbursement	
Mailing Address One Concourse Parkway Suite 300		07 / 02 / 2010	
City Atlanta State GA Zip Code 30328		Amount of Each Disbursement this Period	
Purpose of Disbursement Credit Card Merchant Fee		75.00	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) .....	6803.01
TOTAL This Period (last page this line number only) .....	

10020734007

**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 545 / 582		
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) Elavon	Transaction ID: SB21B.58 Date of Disbursement 08 / 02 / 2010
	Mailing Address One Concourse Parkway Suite 300	Amount of Each Disbursement this Period 75.00
	City Atlanta State GA Zip Code 30328	
	Purpose of Disbursement Credit Card Merchant Fee	<input type="checkbox"/> Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Elavon	Transaction ID: SB21B.59 Date of Disbursement 09 / 02 / 2010
	Mailing Address One Concourse Parkway Suite 300	Amount of Each Disbursement this Period 7807.86
	City Atlanta State GA Zip Code 30328	
	Purpose of Disbursement Credit Card Merchant Fee	<input type="checkbox"/> Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Fairfield Inn	Transaction ID: SB21B.60 Date of Disbursement 09 / 24 / 2010
	Mailing Address 1400 N. Halfway Road	Amount of Each Disbursement this Period 98.79
	City Marion State IL Zip Code 62959	
	Purpose of Disbursement Travel	<input type="checkbox"/> Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	7981.65
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 546 / 582					
<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
	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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Fairfield Inn		Transaction ID: SB21B.61 Date of Disbursement 09 / 24 / 2010	
Mailing Address 1400 N. Halfway Road		Amount of Each Disbursement this Period 98.79	
City Marion State IL Zip Code 62959	Purpose of Disbursement Travel	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) Fedex		Transaction ID: SB21B.62 Date of Disbursement 09 / 02 / 2010	
Mailing Address 942 South Shady Grove Road		Amount of Each Disbursement this Period 199.38	
City Memphis State TN Zip Code 38120	Purpose of Disbursement Delivery	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) Fedex		Transaction ID: SB21B.63 Date of Disbursement 09 / 21 / 2010	
Mailing Address 942 South Shady Grove Road		Amount of Each Disbursement this Period 649.75	
City Memphis State TN Zip Code 38120	Purpose of Disbursement Delivery	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) .....	947.92
TOTAL This Period (last page this line number only) .....	[ ]

1002073400

**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 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)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) Fedex	Transaction ID: SB21B.64 Date of Disbursement 09 / 27 / 2010
	Mailing Address 942 South Shady Grove Road	Amount of Each Disbursement this Period 134.82
	City Memphis State TN Zip Code 38120	
	Purpose of Disbursement Delivery Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Fedex	Transaction ID: SB21B.65 Date of Disbursement 09 / 27 / 2010
	Mailing Address 942 South Shady Grove Road	Amount of Each Disbursement this Period 105.13
	City Memphis State TN Zip Code 38120	
	Purpose of Disbursement Delivery Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Fedex	Transaction ID: SB21B.66 Date of Disbursement 09 / 27 / 2010
	Mailing Address 942 South Shady Grove Road	Amount of Each Disbursement this Period 97.77
	City Memphis State TN Zip Code 38120	
	Purpose of Disbursement Delivery Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	337.72
TOTAL This Period (last page this line number only) .....	

10020734910

**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 548 / 582		
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Freelove Consulting Group Mailing Address PO Box 710187 City San Diego State CA Zip Code 92171 Purpose of Disbursement Fundraising Consulting/Printing/postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.67 Date of Disbursement 08 / 27 / 2010
	Amount of Each Disbursement this Period 9116.29
	Category/Type
	Disbursement For:
	Office Sought:

<b>B.</b> Full Name (Last, First, Middle Initial) French Gourmet Mailing Address 960 Turquoise Street City San Diego State CA Zip Code 92109 Purpose of Disbursement Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.68 Date of Disbursement 09 / 30 / 2010
	Amount of Each Disbursement this Period 2656.49
	Category/Type
	Disbursement For:
	Office Sought:

<b>C.</b> Full Name (Last, First, Middle Initial) Glenwild Golf Club & Spa Mailing Address 7600 Glenwild Drive City Park City State UT Zip Code 84098 Purpose of Disbursement Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.69 Date of Disbursement 09 / 13 / 2010
	Amount of Each Disbursement this Period 2383.17
	Category/Type
	Disbursement For:
	Office Sought:

SUBTOTAL of Disbursements This Page (optional) .....	14155.95
TOTAL This Period (last page this line number only) .....	

10020714011



**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 549 / 582						
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) Hampton Inn - Clovis, CA	Transaction ID: SB21B.70 Date of Disbursement 09 / 22 / 2010
	Mailing Address 855 Gettysburg Avenue	Amount of Each Disbursement this Period 119.90
	City Clovis State CA Zip Code 93612	
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Hyatt Hotels	Transaction ID: SB21B.72 Date of Disbursement 09 / 30 / 2010
	Mailing Address 71 South Wacker Drive 12th Floor	Amount of Each Disbursement this Period 344.04
	City Chicago State IL Zip Code 60606	
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Imageactive-Profitable Connections	Transaction ID: SB21B.73 Date of Disbursement 08 / 27 / 2010
	Mailing Address 4191 Stansbury Ave	Amount of Each Disbursement this Period 655.39
	City Sherman Oaks State CA Zip Code 92621	
	Purpose of Disbursement Photography Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	1119.33
TOTAL This Period (last page this line number only) .....	

10020754912

**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 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)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) Imageactive-Profitable Connections	Transaction ID: SB21B.74 Date of Disbursement
	Mailing Address 4191 Stansbury Ave	<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City Sherman Oaks State CA Zip Code 92621	Amount of Each Disbursement this Period
	Purpose of Disbursement Photography Service Candidate Name	<input type="text" value="623.02"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Imageactive-Profitable Connections	Transaction ID: SB21B.75 Date of Disbursement
	Mailing Address 4191 Stansbury Ave	<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Sherman Oaks State CA Zip Code 92621	Amount of Each Disbursement this Period
	Purpose of Disbursement Photography Service Candidate Name	<input type="text" value="508.88"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Imageactive-Profitable Connections	Transaction ID: SB21B.76 Date of Disbursement
	Mailing Address 4191 Stansbury Ave	<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Sherman Oaks State CA Zip Code 92621	Amount of Each Disbursement this Period
	Purpose of Disbursement Photography Service Candidate Name	<input type="text" value="628.87"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	<input type="text" value="1760.77"/>
TOTAL This Period (last page this line number only) .....	<input type="text"/>

10020734913

**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 551 / 582		
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>Imageactive-Profitable Connections</b>	Transaction ID: <b>SB21B.77</b>	
	Date of Disbursement <b>09</b> / <b>30</b> / <b>2010</b>	
Mailing Address <b>4191 Stansbury Ave</b>	Amount of Each Disbursement this Period <b>407.91</b>	
City <b>Sherman Oaks</b> State <b>CA</b> Zip Code <b>92621</b>	Purpose of Disbursement <b>Photography Service</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. Full Name (Last, First, Middle Initial) <b>Island Hotel</b>	Transaction ID: <b>SB21B.78</b>	
	Date of Disbursement <b>09</b> / <b>07</b> / <b>2010</b>	
Mailing Address <b>690 Newport Center Drive</b>	Amount of Each Disbursement this Period <b>2500.00</b>	
City <b>Newport Beach</b> State <b>CA</b> Zip Code <b>92660</b>	Purpose of Disbursement <b>Travel</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. Full Name (Last, First, Middle Initial) <b>Island Hotel</b>	Transaction ID: <b>SB21B.79</b>	
	Date of Disbursement <b>09</b> / <b>15</b> / <b>2010</b>	
Mailing Address <b>690 Newport Center Drive</b>	Amount of Each Disbursement this Period <b>5088.10</b>	
City <b>Newport Beach</b> State <b>CA</b> Zip Code <b>92660</b>	Purpose of Disbursement <b>Catering</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7996.01</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

1002073491A

**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 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

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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) JC Dill Photography		Transaction ID: SB21B.80 Date of Disbursement 09 / 30 / 2010	
Mailing Address 101 First St #111		Amount of Each Disbursement this Period 1300.00	
City Los Altos State CA Zip Code 94022	Purpose of Disbursement Photography Service Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) JC-Evans Inc.		Transaction ID: SB21B.81 Date of Disbursement 08 / 27 / 2010	
Mailing Address 11230 Gold Express Drive Suite 310-325		Amount of Each Disbursement this Period 3969.36	
City Gold River State CA Zip Code 95670	Purpose of Disbursement Printing Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) JC-Evans Inc.		Transaction ID: SB21B.82 Date of Disbursement 09 / 07 / 2010	
Mailing Address 11230 Gold Express Drive Suite 310-325		Amount of Each Disbursement this Period 10232.23	
City Gold River State CA Zip Code 95670	Purpose of Disbursement Printing Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15501.59
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

10020734915

**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 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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) JC-Evans Inc.		Transaction ID: SB21B.83 Date of Disbursement 09 / 29 / 2010
Mailing Address 11230 Gold Express Drive Suite 310-325		Amount of Each Disbursement this Period 11185.84
City Gold River State CA Zip Code 95670	Purpose of Disbursement Printing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type
<b>B.</b> Full Name (Last, First, Middle Initial) Jet Blue Airlines		Transaction ID: SB21B.84 Date of Disbursement 09 / 22 / 2010
Mailing Address PO Box 17435		Amount of Each Disbursement this Period 104.70
City Salt Lake City State UT Zip Code 84117	Purpose of Disbursement Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type
<b>C.</b> Full Name (Last, First, Middle Initial) John Decker Photography		Transaction ID: SB21B.85 Date of Disbursement 09 / 07 / 2010
Mailing Address 2939 27th St		Amount of Each Disbursement this Period 548.75
City Sacramento State CA Zip Code 95818	Purpose of Disbursement Photography Service Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) .....	11839.29
TOTAL This Period (last page this line number only) .....	

10020714915

**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 554 / 582						
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) JW Marriott Camelback	Transaction ID: SB21B.86
	Mailing Address 5402 East Lincoln Drive	Date of Disbursement 09 / 07 / 2010
City Scottsdale State AZ Zip Code 85253	Amount of Each Disbursement this Period	613.00
Purpose of Disbursement Catering/Staging	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

B.	Full Name (Last, First, Middle Initial) JW Marriott Camelback	Transaction ID: SB21B.87
	Mailing Address 5402 East Lincoln Drive	Date of Disbursement 09 / 07 / 2010
City Scottsdale State AZ Zip Code 85253	Amount of Each Disbursement this Period	1756.28
Purpose of Disbursement Catering/Staging	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

C.	Full Name (Last, First, Middle Initial) Kramer & Associates	Transaction ID: SB21B.88
	Mailing Address 2222 Francisco Drive Suite 510-183	Date of Disbursement 08 / 27 / 2010
City El Dorado Hills State CA Zip Code 95762	Amount of Each Disbursement this Period	5000.00
Purpose of Disbursement Fundraising Consulting	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	7369.28
TOTAL This Period (last page this line number only) .....	

10020734317

**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 555 / 582					
<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
	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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Kramer & Associates		Transaction ID: SB21B.89 Date of Disbursement 09 / 29 / 2010
Mailing Address 2222 Francisco Drive Suite 510-183		Amount of Each Disbursement this Period 13185.93
City El Dorado Hills State CA Zip Code 95762	Purpose of Disbursement Fundraising Consulting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>B.</b> Full Name (Last, First, Middle Initial) La Jolla Beach & Tennis Club		Transaction ID: SB21B.90 Date of Disbursement 09 / 13 / 2010
Mailing Address 2000 Spindrift Dr		Amount of Each Disbursement this Period 2241.85
City La Jolla State CA Zip Code 92037	Purpose of Disbursement Catering Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) Liquid Consulting LLC		Transaction ID: SB21B.91 Date of Disbursement 08 / 27 / 2010
Mailing Address 270 Mahonia Circle		Amount of Each Disbursement this Period 13280.00
City Sacramento State CA Zip Code 95835	Purpose of Disbursement Fundraising Consulting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	28707.78
<b>TOTAL</b> This Period (last page this line number only) .....	[ ]

10020734913

**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 556 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>Liquid Consulting LLC</b>	Transaction ID: <b>SB21B.92</b>
	Date of Disbursement <b>09</b> / <b>14</b> / <b>2010</b>
Mailing Address <b>270 Mahonia Circle</b>	Amount of Each Disbursement this Period <b>26510.00</b>
City <b>Sacramento</b> State <b>CA</b> Zip Code <b>95835</b>	
Purpose of Disbursement <b>Fundraising Consulting</b>	<input type="checkbox"/> Category/Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
State:    District:	<input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) <b>Lou Gentile's Flower Basket Inc.</b>	Transaction ID: <b>SB21B.93</b>
	Date of Disbursement <b>09</b> / <b>07</b> / <b>2010</b>
Mailing Address <b>4918 N Blackstone Ave</b>	Amount of Each Disbursement this Period <b>2266.68</b>
City <b>Fresno</b> State <b>CA</b> Zip Code <b>93726</b>	
Purpose of Disbursement <b>Floral Arrangements</b>	<input type="checkbox"/> Category/Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
State:    District:	<input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) <b>Mailing Systems Inc.</b>	Transaction ID: <b>SB21B.94</b>
	Date of Disbursement <b>08</b> / <b>16</b> / <b>2010</b>
Mailing Address <b>2431 Mercantile Dr Suite A</b>	Amount of Each Disbursement this Period <b>617.96</b>
City <b>Rancho Cordova</b> State <b>CA</b> Zip Code <b>95742</b>	
Purpose of Disbursement <b>Printing/Postage</b>	<input type="checkbox"/> Category/Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
State:    District:	<input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>29394.64</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734919



**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 557 / 582		
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) Mailing Systems Inc.	Transaction ID: SB21B.95	
	Date of Disbursement 08 / 25 / 2010	
Mailing Address 2431 Mercantile Dr Suite A	Amount of Each Disbursement this Period 1476.36	
City Rancho Cordova State CA Zip Code 95742	Purpose of Disbursement Printing/Postage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Mailing Systems Inc.	Transaction ID: SB21B.96	
	Date of Disbursement 09 / 02 / 2010	
Mailing Address 2431 Mercantile Dr Suite A	Amount of Each Disbursement this Period 1455.88	
City Rancho Cordova State CA Zip Code 95742	Purpose of Disbursement Printing/Postage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Mailing Systems Inc.	Transaction ID: SB21B.97	
	Date of Disbursement 09 / 02 / 2010	
Mailing Address 2431 Mercantile Dr Suite A	Amount of Each Disbursement this Period 1434.53	
City Rancho Cordova State CA Zip Code 95742	Purpose of Disbursement Printing/Postage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) .....	4366.77
TOTAL This Period (last page this line number only) .....	

10020734920

**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 558 / 582						
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) Mailing Systems Inc.	Transaction ID: SB21B.98
	Mailing Address 2431 Mercantile Dr Suite A	Date of Disbursement 09 / 13 / 2010
	City Rancho Cordova State CA Zip Code 95742	Amount of Each Disbursement this Period 547.39
	Purpose of Disbursement Printing/Postage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mailrite Print & Mail Inc.	Transaction ID: SB21B.100
	Mailing Address 834 Striker Ave Suite C	Date of Disbursement 09 / 29 / 2010
	City Sacramento State CA Zip Code 95834	Amount of Each Disbursement this Period 3550.26
	Purpose of Disbursement Printing/Postage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mailrite Print & Mail Inc.	Transaction ID: SB21B.99
	Mailing Address 834 Striker Ave Suite C	Date of Disbursement 09 / 27 / 2010
	City Sacramento State CA Zip Code 95834	Amount of Each Disbursement this Period 1586.60
	Purpose of Disbursement Printing/Postage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	5684.25
TOTAL This Period (last page this line number only) .....	

10020734921

**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 checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
	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)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) Majestic Valet Parking	Transaction ID: SB21B.101 Date of Disbursement 08 / 27 / 2010
	Mailing Address 7 Tulip Place	Amount of Each Disbursement this Period 300.00
	City Aliso Viejo State CA Zip Code 92656	
	Purpose of Disbursement Parking Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Montna Farms	Transaction ID: SB21B.102 Date of Disbursement 09 / 14 / 2010
	Mailing Address 12755 Garden Hwy	Amount of Each Disbursement this Period 4317.13
	City Yuba City State CA Zip Code 95991	
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paco Quartets	Transaction ID: SB21B.103 Date of Disbursement 09 / 15 / 2010
	Mailing Address 4000 Middlefield Rd #M1	Amount of Each Disbursement this Period 375.00
	City Palo Alto State CA Zip Code 94303	
	Purpose of Disbursement Entertainment Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	4992.13
TOTAL This Period (last page this line number only) .....	

10020734822

**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 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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Padre Hotel		Transaction ID: SB21B.104 Date of Disbursement 08 / 06 / 2010
Mailing Address 1702 18th St		Amount of Each Disbursement this Period 4052.88
City Bakersfield State CA Zip Code 93301	Purpose of Disbursement Catering Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Pardini's Inc.		Transaction ID: SB21B.105 Date of Disbursement 09 / 13 / 2010
Mailing Address 2257 West Shaw		Amount of Each Disbursement this Period 26231.18
City Fresno State CA Zip Code 93711	Purpose of Disbursement Catering Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Peachtree Golf & Country Club		Transaction ID: SB21B.106 Date of Disbursement 09 / 25 / 2010
Mailing Address PO Box 231		Amount of Each Disbursement this Period 8131.89
City Marysville State CA Zip Code 95901	Purpose of Disbursement Catering Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	38415.95
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

10020734023

**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 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)  
CARLY VICTORY COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Planet Grafix</p> <p>Mailing Address PO Box 16791</p> <p>City San Diego State CA Zip Code 92176</p> <p>Purpose of Disbursement Printing</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>Transaction ID: SB21B.107</p> <p>Date of Disbursement 08 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 1300.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Planet Grafix</p> <p>Mailing Address PO Box 16791</p> <p>City San Diego State CA Zip Code 92176</p> <p>Purpose of Disbursement Printing</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>Transaction ID: SB21B.108</p> <p>Date of Disbursement 09 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 445.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Planet Grafix</p> <p>Mailing Address PO Box 16791</p> <p>City San Diego State CA Zip Code 92176</p> <p>Purpose of Disbursement Printing</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>Transaction ID: SB21B.109</p> <p>Date of Disbursement 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 420.00</p>

SUBTOTAL of Disbursements This Page (optional) .....	2165.00
TOTAL This Period (last page this line number only) .....	

10020734924

**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 562 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

A.	Full Name (Last, First, Middle Initial) Precision Parking	Transaction ID: SB21B.110 Date of Disbursement 09 / 29 / 2010
	Mailing Address 2005 Howard Avenue	Amount of Each Disbursement this Period 1600.00
	City San Carlos State CA Zip Code 94070	
	Purpose of Disbursement Parking Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PVS Chemicals	Transaction ID: SB21B.111 Date of Disbursement 09 / 01 / 2010
	Mailing Address 10900 Harper Dr	Amount of Each Disbursement this Period 6726.98
	City Detroit State MI Zip Code 48213	
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Renee Croce	Transaction ID: SB21B.112 Date of Disbursement 09 / 29 / 2010
	Mailing Address 909 N Sepulveda Blvd Suite 120	Amount of Each Disbursement this Period 1500.00
	City El Segundo State CA Zip Code 90245	
	Purpose of Disbursement Fundraising Consulting Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	9826.98
TOTAL This Period (last page this line number only) .....	

10020734023

**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 563 / 582		
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) Renee Croce & Associates	Transaction ID: SB21B.113
	Mailing Address 909 N Sepulveda Blvd Suite 120	Date of Disbursement 09 / 29 / 2010
City El Segundo State CA Zip Code 90245	Amount of Each Disbursement this Period	2311.76
Purpose of Disbursement Postage	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>B.</b>	Full Name (Last, First, Middle Initial) Ridgewells Caterers	Transaction ID: SB21B.114
	Mailing Address 5525 Dorsey Lane	Date of Disbursement 09 / 27 / 2010
City Bethesda State MD Zip Code 20816	Amount of Each Disbursement this Period	2000.00
Purpose of Disbursement Catering	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>C.</b>	Full Name (Last, First, Middle Initial) RJ Jones LLC dba BBQ Barn	Transaction ID: SB21B.115
	Mailing Address 632 Main	Date of Disbursement 09 / 24 / 2010
City Harrisburgh State IL Zip Code 62946	Amount of Each Disbursement this Period	7746.80
Purpose of Disbursement Catering	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>12058.56</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020734926

**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 checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
	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)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) Saint Louis Club	Transaction ID: SB21B.116
	Mailing Address 7701 Forsyth Blvd	Date of Disbursement 09 / 07 / 2010
	City Saint Louis State MO Zip Code 63105	Amount of Each Disbursement this Period 2081.60
	Purpose of Disbursement Catering Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) San Diego Marriott Del Mar	Transaction ID: SB21B.117
	Mailing Address 11966 El Camino Real	Date of Disbursement 09 / 07 / 2010
	City San Diego State CA Zip Code 92130	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement Catering Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) San Diego Marriott Del Mar	Transaction ID: SB21B.118
	Mailing Address 11966 El Camino Real	Date of Disbursement 09 / 27 / 2010
	City San Diego State CA Zip Code 92130	Amount of Each Disbursement this Period 2174.50
	Purpose of Disbursement Catering/Staging Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4556.10
<b>TOTAL</b> This Period (last page this line number only) .....	

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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 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)  
CARLY VICTORY COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) San Diego Marriott Del Mar</p> <p>Mailing Address 11966 El Camino Real</p> <p>City San Diego State CA Zip Code 92130</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.119</p> <p>Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 222.51</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) San Diego Marriott Del Mar</p> <p>Mailing Address 11966 El Camino Real</p> <p>City San Diego State CA Zip Code 92130</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.120</p> <p>Date of Disbursement 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 134.03</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) San Diego Marriott Del Mar</p> <p>Mailing Address 11966 El Camino Real</p> <p>City San Diego State CA Zip Code 92130</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.121</p> <p>Date of Disbursement 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 134.03</p>

SUBTOTAL of Disbursements This Page (optional) .....	490.57
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 566 / 582		
	<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

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NAME OF COMMITTEE (In Full)  
CARLY VICTORY COMMITTEE

A. Full Name (Last, First, Middle Initial) Shady Canyon Golf Club	Transaction ID: SB21B.122
	Date of Disbursement 09 / 07 / 2010
Mailing Address 100 Shady Canyon Drive	Amount of Each Disbursement this Period 2285.36
City Irvine State CA Zip Code 92403	Purpose of Disbursement Catering/Staging Candidate Name Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Skirvin Hotel	Transaction ID: SB21B.123
	Date of Disbursement 08 / 23 / 2010
Mailing Address 1 Park Ave	Amount of Each Disbursement this Period 1586.61
City Oklahoma City State OK Zip Code 73102	Purpose of Disbursement Catering Candidate Name Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB21B.124
	Date of Disbursement 09 / 15 / 2010
Mailing Address PO Box 36647-1CR	Amount of Each Disbursement this Period 400.00
City Dallas State TX Zip Code 75235	Purpose of Disbursement Travel Candidate Name Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) .....	4271.97
TOTAL This Period (last page this line number only) .....	

10020734929

**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 checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
	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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Southwest Airlines		Transaction ID: SB21B.125 Date of Disbursement 09 / 15 / 2010	
Mailing Address PO Box 36647-1CR		Amount of Each Disbursement this Period 415.70	
City Dallas	State TX	Zip Code 75235	Category/ Type
Purpose of Disbursement Travel		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____		

<b>B.</b> Full Name (Last, First, Middle Initial) Southwest Airlines		Transaction ID: SB21B.126 Date of Disbursement 09 / 20 / 2010	
Mailing Address PO Box 36647-1CR		Amount of Each Disbursement this Period 415.70	
City Dallas	State TX	Zip Code 75235	Category/ Type
Purpose of Disbursement Travel		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____		

<b>C.</b> Full Name (Last, First, Middle Initial) Southwest Airlines		Transaction ID: SB21B.127 Date of Disbursement 09 / 20 / 2010	
Mailing Address PO Box 36647-1CR		Amount of Each Disbursement this Period 176.70	
City Dallas	State TX	Zip Code 75235	Category/ Type
Purpose of Disbursement Travel		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) .....	1008.10
TOTAL This Period (last page this line number only) .....	_____

10020734030

**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 568 / 582
	<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)  
**CARLY VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Southwest Airlines  Mailing Address PO Box 36647-1CR  City Dallas State TX Zip Code 75235  Purpose of Disbursement Travel  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.128 Date of Disbursement 09 / 20 / 2010
	Amount of Each Disbursement this Period 176.70
	Category/Type
	Category/Type
	Category/Type

<b>B.</b> Full Name (Last, First, Middle Initial) Southwest Airlines  Mailing Address PO Box 36647-1CR  City Dallas State TX Zip Code 75235  Purpose of Disbursement Travel  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.129 Date of Disbursement 09 / 20 / 2010
	Amount of Each Disbursement this Period 171.70
	Category/Type
	Category/Type
	Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) Southwest Airlines  Mailing Address PO Box 36647-1CR  City Dallas State TX Zip Code 75235  Purpose of Disbursement Travel  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.130 Date of Disbursement 09 / 22 / 2010
	Amount of Each Disbursement this Period 195.70
	Category/Type
	Category/Type
	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	544.10
<b>TOTAL</b> This Period (last page this line number only) .....	

1002074431

**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 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)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) Stamps.com	Transaction ID: SB21B.131 Date of Disbursement 09 / 02 / 2010
	Mailing Address 12959 Coral Tree Place	Amount of Each Disbursement this Period 10.00
	City Los Angeles State CA Zip Code 90066	
	Purpose of Disbursement Postage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Steven H. Gordon & Associates	Transaction ID: SB21B.132 Date of Disbursement 08 / 27 / 2010
	Mailing Address 507 Capitol Court #100	Amount of Each Disbursement this Period 1416.80
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sun Air Jets LLC	Transaction ID: SB21B.133 Date of Disbursement 08 / 24 / 2010
	Mailing Address 855 Aviation Drive	Amount of Each Disbursement this Period 3458.16
	City Camarillo State CA Zip Code 93010	
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	4884.96
TOTAL This Period (last page this line number only) .....	

1002073402

**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 checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
	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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Sunset Parking		Transaction ID: SB21B.134 Date of Disbursement 09 / 29 / 2010	
Mailing Address PO Box 551		Amount of Each Disbursement this Period 480.00	
City Solana Beach State CA Zip Code 92075	Purpose of Disbursement Parking Service	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:            District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) Sutter Club		Transaction ID: SB21B.135 Date of Disbursement 08 / 27 / 2010	
Mailing Address 1220 Ninth St		Amount of Each Disbursement this Period 8836.52	
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Catering/Facility Rental	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:            District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) Swallow's Inn		Transaction ID: SB21B.136 Date of Disbursement 08 / 27 / 2010	
Mailing Address 31786 Camino Capistrano		Amount of Each Disbursement this Period 1699.35	
City San Juan Capistran State CA Zip Code 92675	Purpose of Disbursement Catering	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:            District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	11015.87
<b>TOTAL</b> This Period (last page this line number only) .....	.....

10020734933

**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 571 / 582						
	<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

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) TC Printing	Transaction ID: SB21B.137	
	Date of Disbursement 09 / 07 / 2010	
Mailing Address 1215 G St	Amount of Each Disbursement this Period 1077.85	
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. Full Name (Last, First, Middle Initial) The Hallisey Group	Transaction ID: SB21B.138	
	Date of Disbursement 09 / 07 / 2010	
Mailing Address 38 E 85th St Suite 5E	Amount of Each Disbursement this Period 5000.00	
City New York State NY Zip Code 10028	Purpose of Disbursement Fundraising Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. Full Name (Last, First, Middle Initial) The Hallisey Group	Transaction ID: SB21B.139	
	Date of Disbursement 09 / 29 / 2010	
Mailing Address 38 E 85th St Suite 5E	Amount of Each Disbursement this Period 5000.00	
City New York State NY Zip Code 10028	Purpose of Disbursement Fundraising Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	11077.85
TOTAL This Period (last page this line number only) .....	

10020734934

**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 checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
	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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) The Marriott Group		Transaction ID: SB21B.140 Date of Disbursement 09 / 07 / 2010	
Mailing Address 113 South Saint Asaph St Suite 200		Amount of Each Disbursement this Period 10000.00	
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Fundraising Consulting	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	
State: District:			

<b>B.</b> Full Name (Last, First, Middle Initial) The Monaco Group		Transaction ID: SB21B.141 Date of Disbursement 08 / 27 / 2010	
Mailing Address 14352 Franklin Ave Unit B		Amount of Each Disbursement this Period 2441.76	
City Tustin State CA Zip Code 92780	Purpose of Disbursement Printing/Postage	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	
State: District:			

<b>C.</b> Full Name (Last, First, Middle Initial) The Monaco Group		Transaction ID: SB21B.142 Date of Disbursement 09 / 13 / 2010	
Mailing Address 14352 Franklin Ave Unit B		Amount of Each Disbursement this Period 5048.47	
City Tustin State CA Zip Code 92780	Purpose of Disbursement Printing/Postage	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	17490.23
<b>TOTAL</b> This Period (last page this line number only) .....	[ ]

10020734933



**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 573 / 582

<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)  
CARLY VICTORY COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Pacific Club</p> <p>Mailing Address 4110 MacArthur Blvd</p> <p>City Newport Beach State CA Zip Code 92660</p> <p>Purpose of Disbursement Catering <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB21B.143 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 479.91</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Peninsula</p> <p>Mailing Address 9882 South Santa Monica Boulevard</p> <p>City Beverly Hills State CA Zip Code 90212</p> <p>Purpose of Disbursement Catering <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB21B.144 Date of Disbursement 09 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Turnip Rose</p> <p>Mailing Address 1850 W. Collins Avenue</p> <p>City Orange State CA Zip Code 92867</p> <p>Purpose of Disbursement Catering <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB21B.145 Date of Disbursement 08 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 9555.75</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	12535.66
<b>TOTAL</b> This Period (last page this line number only) .....	

10020741

**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 checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
	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)  
CARLY VICTORY COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address PO Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Travel <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.146 Date of Disbursement 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 238.70</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address PO Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Travel <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.147 Date of Disbursement 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 363.70</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address PO Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Travel <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.148 Date of Disbursement 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 363.70</p>

SUBTOTAL of Disbursements This Page (optional) .....	966.10
TOTAL This Period (last page this line number only) .....	

10020734037

**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 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)  
CARLY VICTORY COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address PO Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Travel</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>Transaction ID: SB21B.149 Date of Disbursement 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 238.70</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address PO Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Travel</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>Transaction ID: SB21B.150 Date of Disbursement 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 363.70</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address PO Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Travel</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>Transaction ID: SB21B.151 Date of Disbursement 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 363.70</p>

SUBTOTAL of Disbursements This Page (optional) .....	966.10
TOTAL This Period (last page this line number only) .....	

10020734933

**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 576 / 582

<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)  
CARLY VICTORY COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.152  
Date of Disbursement 09 / 21 / 2010

Amount of Each Disbursement this Period 137.70

Category/Type

**B.** Full Name (Last, First, Middle Initial)  
United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.153  
Date of Disbursement 09 / 27 / 2010

Amount of Each Disbursement this Period 582.70

Category/Type

**C.** Full Name (Last, First, Middle Initial)  
United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.154  
Date of Disbursement 09 / 28 / 2010

Amount of Each Disbursement this Period 806.70

Category/Type

SUBTOTAL of Disbursements This Page (optional) ..... ► 1527.10

TOTAL This Period (last page this line number only) ..... ►

10020734033

**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 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)  
CARLY VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) Virgin America Airlines	Transaction ID: SB21B.155 Date of Disbursement 09 / 20 / 2010
	Mailing Address 555 Airport Blvd	Amount of Each Disbursement this Period 408.70
	City Burlingame State CA Zip Code 94010	
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Walker Lewis Rents	Transaction ID: SB21B.156 Date of Disbursement 09 / 07 / 2010
	Mailing Address 5635 N Figarden Dr	Amount of Each Disbursement this Period 6323.31
	City Fresno State CA Zip Code 93722	
	Purpose of Disbursement Furniture Rental Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Wendy Warfield & Associates	Transaction ID: SB21B.157 Date of Disbursement 09 / 07 / 2010
	Mailing Address PO Box 471	Amount of Each Disbursement this Period 14020.00
	City Sacramento State CA Zip Code 95812	
	Purpose of Disbursement Fundraising Consulting Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	20752.01
TOTAL This Period (last page this line number only) .....	

10020714110200

**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 578 / 582	
<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24
	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c
		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	25
							29
							26
							30b

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NAME OF COMMITTEE (In Full)  
**CARLY VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>Wendy Warfield &amp; Associates</b>		Transaction ID: SB21B.158																					
Mailing Address <b>PO Box 471</b>		Date of Disbursement																					
City <b>Sacramento</b> State <b>CA</b> Zip Code <b>95812</b>		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	7	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y														
0	9	/	2	7	/	2	0	1	0														
Purpose of Disbursement <b>Fundraising Consulting/Travel</b>		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: center;">53868.47</td> </tr> </table>		53868.47																			
53868.47																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

B. Full Name (Last, First, Middle Initial) <b>Westin Bellevue</b>		Transaction ID: SB21B.159																					
Mailing Address <b>601 Bellevue Way NE</b>		Date of Disbursement																					
City <b>Bellevue</b> State <b>WA</b> Zip Code <b>98004</b>		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	7	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y														
0	9	/	1	7	/	2	0	1	0														
Purpose of Disbursement <b>Catering</b>		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: center;">3044.62</td> </tr> </table>		3044.62																			
3044.62																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

C. Full Name (Last, First, Middle Initial) <b>Westin Bellevue</b>		Transaction ID: SB21B.160																					
Mailing Address <b>601 Bellevue Way NE</b>		Date of Disbursement																					
City <b>Bellevue</b> State <b>WA</b> Zip Code <b>98004</b>		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	6	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y														
0	9	/	1	6	/	2	0	1	0														
Purpose of Disbursement <b>Travel</b>		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: center;">284.85</td> </tr> </table>		284.85																			
284.85																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>57197.94</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

10020714041

**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 579 / 582

<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
	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)  
CARLY VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
Westin Bellevue

Transaction ID: SB21B.161  
Date of Disbursement

Mailing Address 601 Bellevue Way NE

/   /

City Bellevue State WA Zip Code 98004

Amount of Each Disbursement this Period

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
Heartland Values PAC

Transaction ID: SB21B.71  
Date of Disbursement

Mailing Address PO Box 505

/   /

City Sioux Falls State SD Zip Code 57101

Amount of Each Disbursement this Period

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

10020734042

**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 checked="" 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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) CARLY FOR CALIFORNIA		Transaction ID: SB22-1 Date of Disbursement 08 / 27 / 2010
Mailing Address 2651 N. Rock Island Road Ste. 206		Amount of Each Disbursement this Period 105000.00
City Margate State FL Zip Code 33063	Category/ Type	
Purpose of Disbursement TRANSFER - NET JF PROCEEDS		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>B.</b> Full Name (Last, First, Middle Initial) CARLY FOR CALIFORNIA		Transaction ID: SB22-2 Date of Disbursement 09 / 09 / 2010
Mailing Address 2651 N. Rock Island Road Ste. 206		Amount of Each Disbursement this Period 40000.00
City Margate State FL Zip Code 33063	Category/ Type	
Purpose of Disbursement TRANSFER - NET JF PROCEEDS		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>C.</b> Full Name (Last, First, Middle Initial) CARLY FOR CALIFORNIA		Transaction ID: SB22-3 Date of Disbursement 09 / 17 / 2010
Mailing Address 2651 N. Rock Island Road Ste. 206		Amount of Each Disbursement this Period 170000.00
City Margate State FL Zip Code 33063	Category/ Type	
Purpose of Disbursement TRANSFER - NET JF PROCEEDS		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	315000.00
TOTAL This Period (last page this line number only) .....	[ ]

10020734043



**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 checked="" 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)  
CARLY VICTORY COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) CARLY FOR CALIFORNIA		Transaction ID: SB22-4 Date of Disbursement 09 / 23 / 2010
Mailing Address 2651 N. Rock Island Road Ste. 206		Amount of Each Disbursement this Period 125000.00
City Margate State FL Zip Code 33063	Purpose of Disbursement TRANSFER - NET JF PROCEEDS	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) CARLY FOR CALIFORNIA		Transaction ID: SB22-5 Date of Disbursement 09 / 27 / 2010
Mailing Address 2651 N. Rock Island Road Ste. 206		Amount of Each Disbursement this Period 287000.00
City Margate State FL Zip Code 33063	Purpose of Disbursement TRANSFER - NET JF PROCEEDS	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) CARLY FOR CALIFORNIA		Transaction ID: SB22-6 Date of Disbursement 09 / 30 / 2010
Mailing Address 2651 N. Rock Island Road Ste. 206		Amount of Each Disbursement this Period 315000.00
City Margate State FL Zip Code 33063	Purpose of Disbursement TRANSFER - NET JF PROCEEDS	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) .....	727000.00
TOTAL This Period (last page this line number only) .....	

11  
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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 checked="" 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)  
CARLY VICTORY COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN SENATORIAL COMMITTEE</p>		<p>Transaction ID: SB22-7 Date of Disbursement 07 / 29 / 2010</p>
<p>Mailing Address 425 2nd Street NE</p>		<p>Amount of Each Disbursement this Period 155000.00</p>
<p>City Washington State DC Zip Code 20002</p>	<p>Purpose of Disbursement TRANSFER - NET JF PROCEEDS</p>	
<p>Candidate Name</p>		<p>Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		
<p><b>B.</b> Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN SENATORIAL COMMITTEE</p>		<p>Transaction ID: SB22-8 Date of Disbursement 08 / 27 / 2010</p>
<p>Mailing Address 425 2nd Street NE</p>		<p>Amount of Each Disbursement this Period 550000.00</p>
<p>City Washington State DC Zip Code 20002</p>	<p>Purpose of Disbursement TRANSFER - NET JF PROCEEDS</p>	
<p>Candidate Name</p>		<p>Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		
<p><b>C.</b> Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN SENATORIAL COMMITTEE</p>		<p>Transaction ID: SB22-9 Date of Disbursement 09 / 30 / 2010</p>
<p>Mailing Address 425 2nd Street NE</p>		<p>Amount of Each Disbursement this Period 800000.00</p>
<p>City Washington State DC Zip Code 20002</p>	<p>Purpose of Disbursement TRANSFER - NET JF PROCEEDS</p>	
<p>Candidate Name</p>		<p>Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>		<p>1505000.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>		<p>2547000.00</p>

10020734945

# United States Senate

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THE PRECEDING DOCUMENT WAS:

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USPS PRIORITY MAIL \_\_\_\_\_  
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DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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Date of Receipt

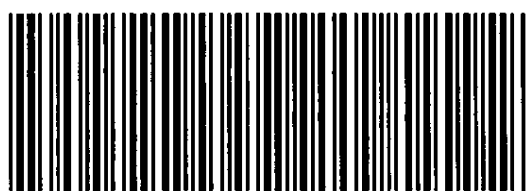
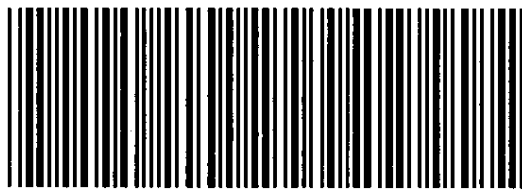
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