

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5  
Duncan D. Hunter for Congress

ADDRESS (number and street) PO Box 1545  
 Check if different than previously reported. (ACC) El Cajon CA 92022

2. **FEC IDENTIFICATION NUMBER** ▼ C00433524 CITY ▲ STATE ▲ ZIP CODE ▲  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A) STATE ▼ DISTRICT

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

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

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

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Chris Marston  
Signature of Treasurer Chris Marston [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 14 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Duncan D. Hunter for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	111999.05	820447.89
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	1500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	111999.05	818947.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	100692.20	461980.20
(b) Total Offsets to Operating Expenditures (from Line 14).....	1123.20	6602.81
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	99569.00	455377.39
8. Cash on Hand at Close of Reporting Period (from Line 27).....	398979.37	
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	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Duncan D. Hunter for Congress**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	28375.00	276191.71
(ii) Unitemized.....	1624.05	31556.18
(iii) TOTAL of contributions from individuals ▶	29999.05	307747.89
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	82000.00	512700.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	111999.05	820447.89
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	1123.20	6602.81
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	113122.25	827050.70

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	100692.20	461980.20
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	1000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1500.00
21. OTHER DISBURSEMENTS .....	17500.00	19500.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	118192.20	482980.20

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	404049.32
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	113122.25
25. SUBTOTAL (add Line 23 and Line 24).....	517171.57
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	118192.20
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	398979.37

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>KEITH R. ANDERSON</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2014	
Mailing Address 5360 JACKSON DR STE 216		<b>Transaction ID : SA11.12424</b>	
City LA MESA	State CA	Zip Code 91942-6004	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00 CONTRIBUTION	
Name of Employer SELF	Occupation REAL ESTATE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650.00		

Full Name (Last, First, Middle Initial) <b>MADELEINE ARISON</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 9999 COLLINS AVE APT 15G		<b>Transaction ID : SA11.12478</b>	
City BAL HARBOUR	State FL	Zip Code 33154-1834	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00 CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2900.00		

Full Name (Last, First, Middle Initial) <b>MADELEINE ARISON</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 9999 COLLINS AVE APT 15G		<b>Transaction ID : SA11.12479</b>	
City BAL HARBOUR	State FL	Zip Code 33154-1834	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00 CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2900.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2100.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

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

FOR LINE NUMBER: PAGE 6 OF 93  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

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

Mailing Address 9999 COLLINS AVE APT 15G

City State Zip Code  
BAL HARBOUR FL 33154-1834

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 31 2014

**Transaction ID : SA11.12489**

Amount of Each Receipt this Period  
 900.00

CONTRIBUTION

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

Mailing Address 9999 COLLINS AVE APT 15G

City State Zip Code  
BAL HARBOUR FL 33154-1834

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

Name of Employer Occupation  
CARNIVAL CORPORATION CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 31 2014

**Transaction ID : SA11.12474**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

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

Mailing Address 9999 COLLINS AVE APT 15G

City State Zip Code  
BAL HARBOUR FL 33154-1834

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

Name of Employer Occupation  
CARNIVAL CORPORATION CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 31 2014

**Transaction ID : SA11.12490**

Amount of Each Receipt this Period  
 600.00

CONTRIBUTION

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

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

Mailing Address 5820 PLAINVIEW RD

City State Zip Code  
BETHESDA MD 20817-6151

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

Name of Employer Occupation  
MERIDIAN HILL STRATEGIES, INC. PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11.12450**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

Mailing Address 8197 COTTAGE ROSE CT

City State Zip Code  
FAIRFAX STATION VA 22039-2515

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

Name of Employer Occupation  
BIERSACK GOVERNMENT RELATIONS TEAM GOVERNMENT RELATIONS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11.12462**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 647 TUMBLE CREEK LN

City State Zip Code  
FALLBROOK CA 92028-2593

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 17 / 2014

**Transaction ID : SA11.12357**

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FORREST W. BREHM**

Mailing Address 14042 RUE MONACO

City DEL MAR State CA Zip Code 92014-3041

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

Name of Employer BREHM COMMUNITIES Occupation HOME BUILDER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11.12385**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 600 TRAVIS  
6800 JPMORGAN CHASE TOWER

City HOUSTON State TX Zip Code 77002-3009

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11.12465**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 2249 VIA VERDE

City EL CAJON State CA Zip Code 92019-2665

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11.12384**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

2250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

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

Mailing Address 9703 LAYMINSTER LN

City State Zip Code  
VIENNA VA 22182-4405

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

Name of Employer Occupation  
THORN RUN PARTNERS PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 10 / 2014

**Transaction ID : SA11.12364**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 319 CONSTITUTION AVE NE

City State Zip Code  
WASHINGTON DC 20002-5913

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

Name of Employer Occupation  
SELF ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 10 / 2014

**Transaction ID : SA11.12394**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 6333 LENOX RD

City State Zip Code  
BETHESDA MD 20817-6023

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

Name of Employer Occupation  
J.A. GREEN AND COMPANY, LLC PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 19 / 2014

**Transaction ID : SA11.12371**

Amount of Each Receipt this Period  
2000.00  
CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JEFFREY ALAN GREEN**

Mailing Address 6333 LENOX RD

City State Zip Code  
BETHESDA MD 20817-6023

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

Name of Employer Occupation  
J.A. GREEN AND COMPANY, LLC PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 19 / 2014

**Transaction ID : SA11.12371B**

Amount of Each Receipt this Period  
-1900.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

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

Mailing Address 6333 LENOX RD

City State Zip Code  
BETHESDA MD 20817-6023

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

Name of Employer Occupation  
J.A. GREEN AND COMPANY, LLC PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 19 / 2014

**Transaction ID : SA11.12380**

Amount of Each Receipt this Period  
1900.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM PRIMARY**

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

Mailing Address 9747 PEBBLE BEACH DR

City State Zip Code  
SANTEE CA 92071-2016

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

Name of Employer Occupation  
TORREY PINES HIGH SCHOOL TEACHER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 30 / 2014

**Transaction ID : SA11.12363**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

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

Mailing Address 1334 DEL SOL LN

City SAN DIEGO State CA Zip Code 92154-3623

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

Name of Employer WARRIOR FOUNDATION Occupation DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 17 / 2014

**Transaction ID : SA11.12358**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address 230 8TH ST SE

City WASHINGTON State DC Zip Code 20003-2107

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

Name of Employer BHFS Occupation POLICY DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 19 / 2014

**Transaction ID : SA11.12372**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

Mailing Address P.O. BOX 2726

City EL CAJON State CA Zip Code 92021-0726

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

Name of Employer GEI ENGINEERING CORP. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : SA11.12443**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

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

Mailing Address 448 7TH ST.

City State Zip Code  
BROOKLYN NY 11215-3612

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFF( INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : SA11.12431**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

Mailing Address 160 PROVENCAL

City State Zip Code  
GROSSE POINTE FARMS MI 48236-2908

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

Name of Employer Occupation  
CENTRA, INC. VICE CHAIRMAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : SA11.12257**

Amount of Each Receipt this Period  
 5000.00

CONTRIBUTION

**[MEMO ITEM]**  
 REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

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

Mailing Address 160 PROVENCAL

City State Zip Code  
GROSSE POINTE FARMS MI 48236-2908

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFF( INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 08 / 2014

**Transaction ID : SA11.12365**

Amount of Each Receipt this Period  
 2400.00

CONTRIBUTION

**[MEMO ITEM]**  
 REATTRIBUTION FROM SPOUSE

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MATTHEW T. MOROUN**

Mailing Address 160 PROVENCAL

City State Zip Code  
GROSSE POINTE FARMS MI 48236-2908

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

Name of Employer Occupation  
CENTRA, INC. VICE CHAIRMAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 08 / 2014

**Transaction ID : SA11.12366**

Amount of Each Receipt this Period  
-2400.00

CONTRIBUTION

**[MEMO ITEM]  
REATTRIBUTION TO SPOUSE**

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

Mailing Address PO BOX 2444

City State Zip Code  
MORGAN CITY LA 70381-2444

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

Name of Employer Occupation  
CANDY FLEET CORPORATION EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 17 / 2014

**Transaction ID : SA11.12361**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

Mailing Address 14390 ROUND LICK LN

City State Zip Code  
CENTREVILLE VA 20120-3361

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

Name of Employer Occupation  
CROSSNATCH TECHNOLOGIES PRESIDENT FOR GLOBAL DEVELOPMENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11.12464**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

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

Mailing Address 3494 SITIO BORDE

City State Zip Code  
CARLSBAD CA 92009-8925

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

Name of Employer Occupation  
PACKARD GOVERNMENT AFFAIRS CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11.12421**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. COURTNEY BRANT RAMSAY**

Mailing Address 11 FLOSSMORE DR

City State Zip Code  
NEW ORLEANS LA 70508-4043

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

Name of Employer Occupation  
ARIES MARINE EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 17 / 2014

**Transaction ID : SA11.12362**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 16 LAKE HELIX DR

City State Zip Code  
LA MESA CA 91941-4434

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

Name of Employer Occupation  
PROPULSION CONTROLS ENGINEERING PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 20 / 2014

**Transaction ID : SA11.12422**

Amount of Each Receipt this Period  
2000.00  
CONTRIBUTION

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

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

Mailing Address 1431 COLA DR

City State Zip Code  
MC LEAN VA 22101-3158

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

Name of Employer Occupation  
SELF CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11.12442**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 7225 PRESERVATION CT.

City State Zip Code  
FULTON MD 20759-2304

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

Name of Employer Occupation  
TECORE NETWORKS PRESIDENT & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11.12493**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 155 E. MARKET AVE

City State Zip Code  
COOS BAY OR 97420-2320

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

Name of Employer Occupation  
SAUSE BROS. PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11.12460**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MATTHEW R. SIMMONS**

Mailing Address 538 VIA DE LA VALLE  
UNIT H

City SOLANA BEACH State CA Zip Code 92075-2485

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

Name of Employer CONSULTANTS COLLABORATIVE Occupation CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11.12414**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 2399 CAMINO DEL RIO S SUITE 102  
# 102

City SAN DIEGO State CA Zip Code 92108-3606

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

Name of Employer R.A. SNYDER PROPERTIES Occupation REALTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 28 / 2014

**Transaction ID : SA11.12389**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

EARMARKED - VOTESANE PAC

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

Mailing Address 8215 PHYLLIS PLACE

City SAN DIEGO State CA Zip Code 92123-3827

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
425.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 31 / 2014

**Transaction ID : SA11.12411**

Amount of Each Receipt this Period  
 25.00  
 CONTRIBUTION

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

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

1525.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MARILYN G. TIGHE**

Mailing Address 8215 PHYLLIS PLACE

City SAN DIEGO State CA Zip Code 92123-3827

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **425.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 28 / 2014**

**Transaction ID : SA11.12412**

Amount of Each Receipt this Period  
**25.00**  
 CONTRIBUTION

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

Mailing Address 8215 PHYLLIS PLACE

City SAN DIEGO State CA Zip Code 92123-3827

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **425.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11.12494**

Amount of Each Receipt this Period  
**25.00**  
 CONTRIBUTION

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

Mailing Address 1341 G ST., NW  
SUITE 700

City WASHINGTON State DC Zip Code 20005-3131

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

Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

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

**Transaction ID : SA11.12463**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JEANETTE L. WRIGHT**

Mailing Address **7501 ELDRIDGE ST**

City **SAN DIEGO** State **CA** Zip Code **92120-**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : SA11.12383**

Amount of Each Receipt this Period  
**50.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PALA BAND OF MISSION INDIANS**

Mailing Address **35008 PALA TEMECULA RD**  
**PMB 50**

City **PALA** State **CA** Zip Code **92059-2419**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

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

**Transaction ID : SA11.12469**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PECHANGA BAND OF LUISENO INDIANS**

Mailing Address **PO BOX 1477**

City **TEMECULA** State **CA** Zip Code **92593-1477**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 06 / 2014**

**Transaction ID : SA11.12353**

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

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

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

**3650.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RINCON BAND OF LUISENO MISSION INDIANS OF THE RINCON RESERVA**

Mailing Address 1 W. TRIBAL RD.

City VALLEY CENTER State CA Zip Code 92082-6015

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : SA11.12445**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SAN PASQUAL BAND OF MISSION INDIANS**

Mailing Address PO BOX 365

City VALLEY CENTER State CA Zip Code 92082-0365

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : SA11.12446**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address PO BOX 2713

City ALEXANDRIA State VA Zip Code 22301-0713

FEC ID number of contributing federal political committee. **C** C00484535

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

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

**Transaction ID : SA11A.5323**

Amount of Each Receipt this Period  
 500.00  
 EARMARKED CONTRIBUTION

**[MEMO ITEM]**  
 EARMARKED. PAC LIMIT NOT AFFECTED

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

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

1000.00

28375.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF JIM SAXTON**

Mailing Address P.O. BOX 795

City State Zip Code  
MOUNT HOLLY NJ 08060-0795

FEC ID number of contributing federal political committee. **C C00197699**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 06 / 2014

**Transaction ID : SA11.12368**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ALLEGHENY TECHNOLOGIES INC. PAC**

Mailing Address 1000 SIX PPG PLACE

City State Zip Code  
PITTSBURGH PA 15222-

FEC ID number of contributing federal political committee. **C C00141697**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 19 / 2014

**Transaction ID : SA11.12378**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ALLIANT TECHSYSTEMS INC. EMPLOYEE CITIZEN FUND**

Mailing Address 1300 WILSON BLVD. STE. 400

City State Zip Code  
ARLINGTON VA 22209-2307

FEC ID number of contributing federal political committee. **C C00250209**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11.12456**

Amount of Each Receipt this Period  
2500.00  
CONTRIBUTION

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC**

Mailing Address 1120 CONNECTICUT AVENUE NW, SUITE

City WASHINGTON State DC Zip Code 20036-3971

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : SA11.12398**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN ELECTRIC POWER COMMITTEE FOR RESPONSIBLE GOVERNMENT**

Mailing Address 801 PENNSYLVANIA AVE., NW  
SUITE 320

City WASHINGTON State DC Zip Code 20004-2684

FEC ID number of contributing federal political committee. **C C00096842**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : SA11.12447**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN PRESIDENT LINES LTD POLITICAL ACTION COMMITTEE (APL)**

Mailing Address 16220 N. SCOTTSDALE RD.  
SUITE 300 OFFICE #3143

City SCOTTSDALE State AZ Zip Code 85254-1798

FEC ID number of contributing federal political committee. **C C00137828**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11.12458**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 22 OF 93  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN SHIPPING & LOGISTICS GROUP FREEDOM PAC / ASL FREEDO**

Mailing Address 1 MAYNARD DR

City State Zip Code  
PARK RIDGE NJ 07656-1878

FEC ID number of contributing federal political committee. **C** C00432963

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 10 / 2014

**Transaction ID : SA11.12401**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN SHIPPING & LOGISTICS GROUP FREEDOM PAC / ASL FREEDO**

Mailing Address 1 MAYNARD DR

City State Zip Code  
PARK RIDGE NJ 07656-1878

FEC ID number of contributing federal political committee. **C** C00432963

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2014

**Transaction ID : SA11.12481**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN SHIPPING & LOGISTICS GROUP FREEDOM PAC / ASL FREEDO**

Mailing Address 1 MAYNARD DR

City State Zip Code  
PARK RIDGE NJ 07656-1878

FEC ID number of contributing federal political committee. **C** C00432963

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2014

**Transaction ID : SA11.12482**

Amount of Each Receipt this Period  
2000.00  
CONTRIBUTION

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN WATERWAYS OPERATORS PAC**

Mailing Address 801 N QUINCY ST  
STE 200

City ARLINGTON State VA Zip Code 22203-1708

FEC ID number of contributing federal political committee. **C** C00034678

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.12480**

Amount of Each Receipt this Period  
 5000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN WATERWAYS OPERATORS PAC**

Mailing Address 801 N QUINCY ST  
STE 200

City ARLINGTON State VA Zip Code 22203-1708

FEC ID number of contributing federal political committee. **C** C00034678

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.12480B**

Amount of Each Receipt this Period  
 -2000.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN WATERWAYS OPERATORS PAC**

Mailing Address 801 N QUINCY ST  
STE 200

City ARLINGTON State VA Zip Code 22203-1708

FEC ID number of contributing federal political committee. **C** C00034678

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.12492**

Amount of Each Receipt this Period  
 2000.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM PRIMARY**

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 24 OF 93  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ASSOCIATION OF PRIVATE SECTOR COLLEGES AND UNIVERSITIES PAC**

Mailing Address 1101 CONNECTICUT AVENUE NW, SUITE

City WASHINGTON State DC Zip Code 20036-4346

FEC ID number of contributing federal political committee. **C C00213066**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : SA11.12430**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BAE SYSTEMS USA PAC**

Mailing Address 1300 N. 17TH STREET

City ARLINGTON State VA Zip Code 22209-3803

FEC ID number of contributing federal political committee. **C C00281212**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **7000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 10 / 2014**

**Transaction ID : SA11.12397**

Amount of Each Receipt this Period  
**1500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BARNES & THORNBURG POLITICAL ACTION COMMITTEE**

Mailing Address 11 SOUTH MERIDIAN ST.

City INDIANAPOLIS State IN Zip Code 46204-3506

FEC ID number of contributing federal political committee. **C C00395947**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000.00**

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

**Transaction ID : SA11.12457**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**3500.00**



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

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

FOR LINE NUMBER: PAGE 25 OF 93  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BOEING POLITICAL ACTION COMMITTEE**

Mailing Address 1200 WILSON BOULEVARD

City ARLINGTON State VA Zip Code 22209-2300

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11.12386**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BOEING POLITICAL ACTION COMMITTEE**

Mailing Address 1200 WILSON BOULEVARD

City ARLINGTON State VA Zip Code 22209-2300

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 20 / 2014

**Transaction ID : SA11.12426**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BRIDGEPOINT EDUCATION INC. PAC**

Mailing Address 13500 EVENING CREEK DRIVE, NORTH,

City SAN DIEGO State CA Zip Code 92128-8125

FEC ID number of contributing federal political committee. **C** C00478404

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 06 / 2014

**Transaction ID : SA11.12367**

Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BROWNSTEIN HYATT FARBER SCHRECK PAC**

Mailing Address 410 17TH ST., 22ND FLOOR

City State Zip Code  
DENVER CO 80202-4437

FEC ID number of contributing federal political committee. **C** C00390583

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : SA11.12396**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**COZEN O'CONNOR PAC**

Mailing Address 1900 MARKET ST  
FL 3

City State Zip Code  
PHILADELPHIA PA 19103-3511

FEC ID number of contributing federal political committee. **C** C00312777

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : SA11.12406**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CROWLEY MARITIME CORP. PAC**

Mailing Address 9487 REGENCY SQUARE BLVD

City State Zip Code  
JACKSONVILLE FL 32225-8183

FEC ID number of contributing federal political committee. **C** C00147231

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

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

**Transaction ID : SA11.12452**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CROWLEY MARITIME CORP. PAC**

Mailing Address 9487 REGENCY SQUARE BLVD

City JACKSONVILLE State FL Zip Code 32225-8183

FEC ID number of contributing federal political committee. **C** C00147231

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6500.00

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

**Transaction ID : SA11.12452B**

Amount of Each Receipt this Period  
 -1500.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**CROWLEY MARITIME CORP. PAC**

Mailing Address 9487 REGENCY SQUARE BLVD

City JACKSONVILLE State FL Zip Code 32225-8183

FEC ID number of contributing federal political committee. **C** C00147231

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6500.00

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

**Transaction ID : SA11.12496**

Amount of Each Receipt this Period  
 1500.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**DRESSER INDUSTRIES POLITICAL ACTION COMMITTEE (DIPAC)**

Mailing Address 3190 FAIRVIEW PARK DR.  
STE 700

City FALLS CHURCH State VA Zip Code 22042-4557

FEC ID number of contributing federal political committee. **C** C00066449

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

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

**Transaction ID : SA11.12461**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DRS TECHNOLOGIES, INC. GOOD GOVERNMENT FUND**

Mailing Address 5 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054-3818

FEC ID number of contributing federal political committee. **C** C00275123

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

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

**Transaction ID : SA11.12455**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**EMPLOYEES OF NORTHROP GRUMMAN PAC**

Mailing Address 520 S. GRAND AVE., SUITE 700

City LOS ANGELES State CA Zip Code 90071-2665

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.12475**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ENCORE CAPITAL GROUP, INC. POLITICAL ACTION COMMITTEE (ENCOR**

Mailing Address 3111 CAMINO DEL RIO NORTH SUITE 1300

City SAN DIEGO State CA Zip Code 92108-5750

FEC ID number of contributing federal political committee. **C** C00507392

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : SA11.12369**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 29 OF 93  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FEDERAL EXPRESS PAC**

Mailing Address 942 S. SHADY GROVE ROAD, 1ST FLOOR

City State Zip Code  
MEMPHIS TN 38120-4117

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : SA11.12395**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 320 FIRST ST. SE

City State Zip Code  
WASHINGTON DC 20003-1838

FEC ID number of contributing federal political committee. **C** C00305805

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 27 / 2014

**Transaction ID : SA11.12391**

Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

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

Mailing Address 1299 PENNSYLVANIA AVE NW

City State Zip Code  
WASHINGTON DC 20004-2400

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : SA11.12403**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HOGAN LOVELLS PAC**

Mailing Address 555 - 13TH ST., NW

City State Zip Code  
WASHINGTON DC 20004-1109

FEC ID number of contributing federal political committee. **C C00261339**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 19 / 2014

**Transaction ID : SA11.12374**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**INGRAM BARGE COMPANY PAC**

Mailing Address 4400 HARDING ROAD

City State Zip Code  
NASHVILLE TN 37205-2204

FEC ID number of contributing federal political committee. **C C00364471**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11.12451**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**INTERNATIONAL BROTHERHOOD OF BOILERMAKERS CAMPAIGN ASSISTANC**

Mailing Address 753 STATE AVENUE, SUITE 565

City State Zip Code  
KANSAS CITY KS 66101-2511

FEC ID number of contributing federal political committee. **C C00005157**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : SA11.12410**

Amount of Each Receipt this Period  
 1500.00  
 CONTRIBUTION

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**INVESTMENT COMPANY INSTITUTE PAC**

Mailing Address 1400 H STREET NW, #1200

City WASHINGTON State DC Zip Code 20005-2104

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.12476**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**K&L GATES LLP PAC**

Mailing Address 1601 K STREET NW

City WASHINGTON State DC Zip Code 20006-1682

FEC ID number of contributing federal political committee. **C** C00395970

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : SA11.12404**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KELLEY DRYE & WARREN PAC**

Mailing Address 3050 K ST., NW, SUITE 400

City WASHINGTON State DC Zip Code 20007-5100

FEC ID number of contributing federal political committee. **C** C00301929

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 19 / 2014

**Transaction ID : SA11.12373**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

A. Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES, INC. POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address **600 14TH ST., NW  
STE 800**

City **WASHINGTON** State **DC** Zip Code **20005-2099**

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 14 / 2014**

**Transaction ID : SA11.12416**

Amount of Each Receipt this Period  
**1500.00**  
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**LIBERTY MARITIME CORPORATION PAC**

Mailing Address **1979 MARCUS AVE.  
SUITE 200**

City **LAKE SUCCESS** State **NY** Zip Code **11042-1059**

FEC ID number of contributing federal political committee. **C C00485466**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11.12477**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**MASTERS, MATES AND PILOTS POLITICAL CONTRIBUTION FUND**

Mailing Address **700 MARITIME BLVD  
STE B**

City **LINTHICUM** State **MD** Zip Code **21090-1953**

FEC ID number of contributing federal political committee. **C C00073056**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 10 / 2014**

**Transaction ID : SA11.12405**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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



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

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

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MBDA INC. PAC**

Mailing Address 1300 WILSON BLVD., SUITE 550

City ARLINGTON State VA Zip Code 22209-2324

FEC ID number of contributing federal political committee. **C** C00490037

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : SA11.12429**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 444 N. CAPITOL ST. NW #800

City WASHINGTON State DC Zip Code 20001-1508

FEC ID number of contributing federal political committee. **C** C00279380

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2014

**Transaction ID : SA11.12415**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MICHIGAN SUGAR COMPANY GROWERS PAC**

Mailing Address 2600 S EUCLID AVE

City BAY CITY State MI Zip Code 48706-3414

FEC ID number of contributing federal political committee. **C** C00189126

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : SA11.12407**

Amount of Each Receipt this Period  
1500.00

CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MINN-DAK FARMERS COOPERATIVE PAC**

Mailing Address 7525 RED RIVER ROAD

City WAHPETON State ND Zip Code 58075-9705

FEC ID number of contributing federal political committee. **C** C00164939

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : SA11.12400**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS**

Mailing Address 2000 14TH STREET, SUITE 450

City ARLINGTON State VA Zip Code 22201-2573

FEC ID number of contributing federal political committee. **C** C00283135

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : SA11.12402**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS PAC TEXTILEPAC**

Mailing Address 469 HOSPITAL DR  
STE C

City GASTONIA State NC Zip Code 28054-4779

FEC ID number of contributing federal political committee. **C** C00405555

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : SA11.12408**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 35 OF 93  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL MARINE MANUFACTURERS ASSOCIATION'S BOAT POLITICAL A**

Mailing Address 444 NORTH CAPITOL ST., NW  
SUITE 645

City WASHINGTON State DC Zip Code 20001-1559

FEC ID number of contributing federal political committee. **C** C00245548

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.12459**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1100 WILSON BLVD  
SUITE 1500

City ARLINGTON State VA Zip Code 22209-3900

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11.12382**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 1100 WILSON BLVD., SUITE 1500

City ARLINGTON State VA Zip Code 22209-3900

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.12467**

Amount of Each Receipt this Period  
 2000.00  
 CONTRIBUTION

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

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

Mailing Address 430 N. MICHIGAN AVENUE

City State Zip Code  
CHICAGO IL 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

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

**Transaction ID : SA11.12388**

Amount of Each Receipt this Period  
 3000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROCKWELL COLLINS GOOD GOVERNMENT COMMITTEE**

Mailing Address 1300 WILSON BLVD., SUITE 200

City State Zip Code  
ARLINGTON VA 22209-2307

FEC ID number of contributing federal political committee. **C** C00365684

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : SA11.12399**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ROLLS ROYCE NORTH AMERICA PAC**

Mailing Address 1875 EXPLORER ST., STE. 200

City State Zip Code  
RESTON VA 20190-6022

FEC ID number of contributing federal political committee. **C** C00296822

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11.12453**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 37 OF 93  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RTI INTERNATIONAL METALS INC. PAC**

Mailing Address 1550 CORAOPOLIS HEIGHTS ROAD

City State Zip Code  
CORAOPOLIS PA 15108-2973

FEC ID number of contributing federal political committee. **C C00350280**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 19 / 2014

**Transaction ID : SA11.12375**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SEAWORLD PARKS AND ENTERTAINMENT, INC PAC**

Mailing Address 9205 S PARK CENTER LOOP  
STE 400

City State Zip Code  
ORLANDO FL 32819-8651

FEC ID number of contributing federal political committee. **C C00501163**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 17 / 2014

**Transaction ID : SA11.12360**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address P.O. BOX 50193

City State Zip Code  
SPARKS NV 89435-0193

FEC ID number of contributing federal political committee. **C C00367995**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
6000.00

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

**Transaction ID : SA11.12454**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TRUCKING PAC OF THE AMERICAN TRUCKING ASSOCIATIONS, INC.**

Mailing Address 430 FIRST STREET., S.E.

City	State	Zip Code
WASHINGTON	DC	20003-1826

FEC ID number of contributing federal political committee. **C** C00002881

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 20 / 2014

**Transaction ID : SA11.12425**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**UNION PACIFIC CORPORATION FUND FOR EFFECTIVE GOVERNMENT**

Mailing Address 600 THIRTEENTH ST., NW SUITE 340

City	State	Zip Code
WASHINGTON	DC	20005-3012

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : SA11.12428**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00  
 CONTRIBUTION

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

Mailing Address 55 GLENLAKE PKWY NE

City	State	Zip Code
ATLANTA	GA	30328-3474

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 6500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 19 / 2014

**Transaction ID : SA11.12376**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00  
 CONTRIBUTION

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

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

\_\_\_\_\_ 3500.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

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

Mailing Address 55 GLENLAKE PKWY NE

City ATLANTA State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 19 / 2014

**Transaction ID : SA11.12377**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 55 GLENLAKE PKWY NE

City ATLANTA State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : SA11.12444**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WINE INSTITUTE POLITICAL ACTION COMMITTEE**

Mailing Address 700 13TH ST., NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005-3960

FEC ID number of contributing federal political committee. **C C00065219**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

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

**Transaction ID : SA11.12448**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

2500.00

82000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ALLEN'S FLOWERS & PLANTS**

Mailing Address 5609 LAKE MURRAY BLVD

City LA MESA State CA Zip Code 91942-1928

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1123.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 14 / 2014

**Transaction ID : SA14.5506**

Amount of Each Receipt this Period  
594.00

REFUND OF PURCHASE

**B.** Full Name (Last, First, Middle Initial)  
**ALLEN'S FLOWERS & PLANTS**

Mailing Address 5609 LAKE MURRAY BLVD

City LA MESA State CA Zip Code 91942-1928

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1123.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 09 / 2014

**Transaction ID : SA14.5507**

Amount of Each Receipt this Period  
529.20

REFUND OF PURCHASE

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1123.20

1123.20



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. DUNCAN D. HUNTER</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address PO BOX 1545		Amount of Each Disbursement this Period 266.00 <b>Transaction ID : SB17.I5428</b>
City EL CAJON	State CA	
Zip Code 92022	Purpose of Disbursement REIMBURSEMENT (FLAGS)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. US CAPITOL GIFT SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address FIRST ST SE		Amount of Each Disbursement this Period 266.00 <b>Transaction ID : SB17.I5499</b>
City WASHINGTON	State DC	
Zip Code 20004	Purpose of Disbursement FLAGS	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>[MEMO ITEM]</b> HUNTER 2/19

Full Name (Last, First, Middle Initial) <b>C. SHEILA HARDISON</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 3639 MIDWAY DR #248 # 248		Amount of Each Disbursement this Period 39.66 <b>Transaction ID : SB17.I5419</b>
City SAN DIEGO	State CA	
Zip Code 92110-5254	Purpose of Disbursement FUNDRAISING CONSULTANT EXPENSES	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).....	305.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 93			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. SHEILA HARDISON</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 3639 MIDWAY DR #248 # 248		Amount of Each Disbursement this Period 260.00 <b>Transaction ID : SB17.I5420</b>
City SAN DIEGO State CA Zip Code 92110-5254	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:		

Full Name (Last, First, Middle Initial) <b>B. SHEILA HARDISON</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 3639 MIDWAY DR #248 # 248		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17.I5421</b>
City SAN DIEGO State CA Zip Code 92110-5254	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:		

Full Name (Last, First, Middle Initial) <b>C. SHEILA HARDISON</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 3639 MIDWAY DR #248 # 248		Amount of Each Disbursement this Period 170.23 <b>Transaction ID : SB17.I5422</b>
City SAN DIEGO State CA Zip Code 92110-5254	Purpose of Disbursement MILEAGE REIMBURSEMENT	
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).....	5430.23
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. MARGARET HUNTER</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2014
Mailing Address P.O. BOX 877		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.I5429</b>
City LA MESA	State CA	
Zip Code 91944-0877	Purpose of Disbursement CAMPAIGN 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:	

Full Name (Last, First, Middle Initial) <b>B. MARGARET HUNTER</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address P.O. BOX 877		Amount of Each Disbursement this Period 184.80 <b>Transaction ID : SB17.I5430</b>
City LA MESA	State CA	
Zip Code 91944-0877	Purpose of Disbursement MILEAGE REIMBURSEMENT	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. MARGARET HUNTER</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014
Mailing Address P.O. BOX 877		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.I5431</b>
City LA MESA	State CA	
Zip Code 91944-0877	Purpose of Disbursement CAMPAIGN 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6184.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. MARGARET HUNTER</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 01 / 2014</b>
Mailing Address <b>P.O. BOX 877</b>		Amount of Each Disbursement this Period <b>3000.00</b> <b>Transaction ID : SB17.I5432</b>
City <b>LA MESA</b>	State <b>CA</b>	
Zip Code <b>91944-0877</b>	Purpose of Disbursement <b>CAMPAIGN CONSULTING</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:	

Full Name (Last, First, Middle Initial) <b>B. MARGARET HUNTER</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 04 / 2014</b>
Mailing Address <b>P.O. BOX 877</b>		Amount of Each Disbursement this Period <b>57.92</b> <b>Transaction ID : SB17.I5433</b>
City <b>LA MESA</b>	State <b>CA</b>	
Zip Code <b>91944-0877</b>	Purpose of Disbursement <b>REIMBURSE (BELOW THRESHOLD AMOUNT)</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:	

Full Name (Last, First, Middle Initial) <b>C. MARGARET HUNTER</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 04 / 2014</b>
Mailing Address <b>P.O. BOX 877</b>		Amount of Each Disbursement this Period <b>52.21</b> <b>Transaction ID : SB17.I5434</b>
City <b>LA MESA</b>	State <b>CA</b>	
Zip Code <b>91944-0877</b>	Purpose of Disbursement <b>REIMBURSE (POSTAGE)</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>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3110.13</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement MM / DD / YYYY 01 / 14 / 2014
Mailing Address 475 L'ENFANT PLZ		Amount of Each Disbursement this Period 73.38
City WASHINGTON	State DC	
Zip Code 20024	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I5501
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)	[MEMO ITEM] HUNTER 2/4
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MARGARET HUNTER</b>		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address P.O. BOX 877		Amount of Each Disbursement this Period 73.38
City LA MESA	State CA	
Zip Code 91944-0877	Purpose of Disbursement REIMBURSEMENT	Transaction ID : SB17.I5435
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WALMART</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2014
Mailing Address 702 SW 8TH ST		Amount of Each Disbursement this Period 73.38
City BENTONVILLE	State AR	
Zip Code 72716-6209	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I5527
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)	[MEMO ITEM] M. HUNTER, 3/17
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	73.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial)  
**A. A-1 SELF STORAGE**

Mailing Address 1370 N MAGNOLIA AVE

City EL CAJON State CA Zip Code 92020-1620

Purpose of Disbursement STORAGE RENTAL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 07 / 2014

Amount of Each Disbursement this Period: 240.00

Transaction ID : SB17.I5326

Full Name (Last, First, Middle Initial)  
**B. A-1 SELF STORAGE**

Mailing Address 1370 N MAGNOLIA AVE

City EL CAJON State CA Zip Code 92020-1620

Purpose of Disbursement STORAGE RENTAL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 07 / 2014

Amount of Each Disbursement this Period: 240.00

Transaction ID : SB17.I5327

Full Name (Last, First, Middle Initial)  
**C. A-1 SELF STORAGE**

Mailing Address 1370 N MAGNOLIA AVE

City EL CAJON State CA Zip Code 92020-1620

Purpose of Disbursement STORAGE RENTAL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 07 / 2014

Amount of Each Disbursement this Period: 240.00

Transaction ID : SB17.I5328

**SUBTOTAL** of Disbursements This Page (optional) ..... 720.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 11 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>15.00</b> <b>Transaction ID : SB17.I5330</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</b>	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:	

Full Name (Last, First, Middle Initial) <b>B. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 17 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>12.00</b> <b>Transaction ID : SB17.I5331</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</b>	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:	

Full Name (Last, First, Middle Initial) <b>C. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 18 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>45.00</b> <b>Transaction ID : SB17.I5332</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</b>	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).....	<b>72.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial)  
**A. ADY UBER TECHNOLOGIES**

Mailing Address 182 HOWARD ST., SUITE 8

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement TRANSPORTATION SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 18 / 2014

Amount of Each Disbursement this Period: 12.00

Transaction ID : SB17.I5333

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

Mailing Address 182 HOWARD ST., SUITE 8

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement TRANSPORTATION SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 30 / 2014

Amount of Each Disbursement this Period: 18.00

Transaction ID : SB17.I5334

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

Mailing Address 182 HOWARD ST., SUITE 8

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement TRANSPORTATION SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 05 / 2014

Amount of Each Disbursement this Period: 12.00

Transaction ID : SB17.I5335

**SUBTOTAL** of Disbursements This Page (optional) ..... 42.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 06 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>28.00</b> <b>Transaction ID : SB17.I5336</b>
City <b>SAN FRANCISCO</b> State <b>CA</b> Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</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:		

Full Name (Last, First, Middle Initial) <b>B. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 07 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>10.41</b> <b>Transaction ID : SB17.I5337</b>
City <b>SAN FRANCISCO</b> State <b>CA</b> Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</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:		

Full Name (Last, First, Middle Initial) <b>C. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 12 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>25.00</b> <b>Transaction ID : SB17.I5338</b>
City <b>SAN FRANCISCO</b> State <b>CA</b> Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</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>63.41</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 93		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 13 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>26.00</b> <b>Transaction ID : SB17.I5339</b>
City <b>SAN FRANCISCO</b> State <b>CA</b> Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</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:		

Full Name (Last, First, Middle Initial) <b>B. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 13 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>29.00</b> <b>Transaction ID : SB17.I5340</b>
City <b>SAN FRANCISCO</b> State <b>CA</b> Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</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:		

Full Name (Last, First, Middle Initial) <b>C. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 28 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>15.00</b> <b>Transaction ID : SB17.I5341</b>
City <b>SAN FRANCISCO</b> State <b>CA</b> Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</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>70.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 28 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>35.00</b> <b>Transaction ID : SB17.I5342</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</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:	

Full Name (Last, First, Middle Initial) <b>B. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 04 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>19.00</b> <b>Transaction ID : SB17.I5343</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</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:	

Full Name (Last, First, Middle Initial) <b>C. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 07 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>60.00</b> <b>Transaction ID : SB17.I5344</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</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>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>114.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 08 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>12.00</b> <b>Transaction ID : SB17.I5345</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</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:	

Full Name (Last, First, Middle Initial) <b>B. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 08 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>69.00</b> <b>Transaction ID : SB17.I5346</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</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:	

Full Name (Last, First, Middle Initial) <b>C. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 08 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>12.00</b> <b>Transaction ID : SB17.I5347</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</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>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>93.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 14 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>46.00</b> <b>Transaction ID : SB17.I5348</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</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:	

Full Name (Last, First, Middle Initial) <b>B. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 25 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>18.00</b> <b>Transaction ID : SB17.I5349</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</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:	

Full Name (Last, First, Middle Initial) <b>C. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 26 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>18.00</b> <b>Transaction ID : SB17.I5350</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION SERVICES</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>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>82.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADY UBER TECHNOLOGIES</b>			Date of Disbursement M M / D D / Y Y Y Y <b>03 / 27 / 2014</b>		
Mailing Address <b>182 HOWARD ST., SUITE 8</b>			Amount of Each Disbursement this Period <b>19.00</b>		
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94105</b>	Transaction ID : <b>SB17.I5351</b>		
Purpose of Disbursement <b>TRANSPORTATION SERVICES</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:					

Full Name (Last, First, Middle Initial) <b>B. ADY UBER TECHNOLOGIES</b>			Date of Disbursement M M / D D / Y Y Y Y <b>03 / 28 / 2014</b>		
Mailing Address <b>182 HOWARD ST., SUITE 8</b>			Amount of Each Disbursement this Period <b>10.00</b>		
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94105</b>	Transaction ID : <b>SB17.I5352</b>		
Purpose of Disbursement <b>TRANSPORTATION SERVICES</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:					

Full Name (Last, First, Middle Initial) <b>C. ADY UBER TECHNOLOGIES</b>			Date of Disbursement M M / D D / Y Y Y Y <b>03 / 28 / 2014</b>		
Mailing Address <b>182 HOWARD ST., SUITE 8</b>			Amount of Each Disbursement this Period <b>13.00</b>		
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94105</b>	Transaction ID : <b>SB17.I5353</b>		
Purpose of Disbursement <b>TRANSPORTATION SERVICES</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>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>42.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial)  
**A. ALLEN'S FLOWERS & PLANTS**

Mailing Address 5609 LAKE MURRAY BLVD

City LA MESA State CA Zip Code 91942-1928

Purpose of Disbursement  
EVENT EXPENSES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 08 / 2014

Amount of Each Disbursement this Period  
529.20

Transaction ID : SB17.I5355

Category/Type

Full Name (Last, First, Middle Initial)  
**B. ALLEN'S FLOWERS & PLANTS**

Mailing Address 5609 LAKE MURRAY BLVD

City LA MESA State CA Zip Code 91942-1928

Purpose of Disbursement  
EVENT EXPENSES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 09 / 2014

Amount of Each Disbursement this Period  
594.00

Transaction ID : SB17.I5356

Category/Type

Full Name (Last, First, Middle Initial)  
**C. ALLEN'S FLOWERS & PLANTS**

Mailing Address 5609 LAKE MURRAY BLVD

City LA MESA State CA Zip Code 91942-1928

Purpose of Disbursement  
EVENT EXPENSES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 11 / 2014

Amount of Each Disbursement this Period  
23.74

Transaction ID : SB17.I5357

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 1146.94

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 93		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. ALLEN'S FLOWERS &amp; PLANTS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 14 / 2014</b>
Mailing Address <b>5609 LAKE MURRAY BLVD</b>		Amount of Each Disbursement this Period <b>475.20</b> <b>Transaction ID : SB17.I5358</b>
City <b>LA MESA</b>	State <b>CA</b>	
Zip Code <b>91942-1928</b>	Purpose of Disbursement <b>EVENT EXPENSES</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:	

Full Name (Last, First, Middle Initial) <b>B. ALLEN'S FLOWERS &amp; PLANTS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 22 / 2014</b>
Mailing Address <b>5609 LAKE MURRAY BLVD</b>		Amount of Each Disbursement this Period <b>66.31</b> <b>Transaction ID : SB17.I5359</b>
City <b>LA MESA</b>	State <b>CA</b>	
Zip Code <b>91942-1928</b>	Purpose of Disbursement <b>EVENT SUPPLIES</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:	

Full Name (Last, First, Middle Initial) <b>C. ALLEN'S FLOWERS &amp; PLANTS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 22 / 2014</b>
Mailing Address <b>5609 LAKE MURRAY BLVD</b>		Amount of Each Disbursement this Period <b>78.28</b> <b>Transaction ID : SB17.I5360</b>
City <b>LA MESA</b>	State <b>CA</b>	
Zip Code <b>91942-1928</b>	Purpose of Disbursement <b>EVENT SUPPLIES</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>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>619.79</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. ALPINE MOUNTAIN EMPIRE CHAMBER OF COMMERCE</b>			Date of Disbursement M M / D D / Y Y Y Y <b>02 / 19 / 2014</b>	
Mailing Address <b>2710 ALPINE BLVD_X000D_STE G</b>			Amount of Each Disbursement this Period <b>375.00</b>	
City <b>ALPINE</b>	State <b>CA</b>	Zip Code <b>91901</b>	Transaction ID : <b>SB17.I5361</b>	
Purpose of Disbursement <b>MEMBERSHIP</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:				

Full Name (Last, First, Middle Initial) <b>B. ARISTOTLE INTERNATIONAL, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y <b>01 / 11 / 2014</b>	
Mailing Address <b>205 PENNSYLVANIA AVE SE</b>			Amount of Each Disbursement this Period <b>36.00</b>	
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20003-1164</b>	Transaction ID : <b>SB17.I5515</b>	
Purpose of Disbursement <b>CC PROCESSING</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:				

Full Name (Last, First, Middle Initial) <b>C. ARISTOTLE INTERNATIONAL, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y <b>01 / 30 / 2014</b>	
Mailing Address <b>205 PENNSYLVANIA AVE SE</b>			Amount of Each Disbursement this Period <b>2.75</b>	
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20003-1164</b>	Transaction ID : <b>SB17.I5516</b>	
Purpose of Disbursement <b>CC PROCESSING</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>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>413.75</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. ARISTOTLE INTERNATIONAL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 205 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 2.75 <b>Transaction ID : SB17.I5517</b>
City WASHINGTON State DC Zip Code 20003-1164	Purpose of Disbursement CC PROCESSING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ARISTOTLE INTERNATIONAL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 205 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 2.75 <b>Transaction ID : SB17.I5518</b>
City WASHINGTON State DC Zip Code 20003-1164	Purpose of Disbursement CC PROCESSING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ARISTOTLE INTERNATIONAL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 205 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 71.00 <b>Transaction ID : SB17.I5519</b>
City WASHINGTON State DC Zip Code 20003-1164	Purpose of Disbursement CC PROCESSING	
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).....	76.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 11 / 2014</b>
Mailing Address <b>208 S AKARD ST</b>		Amount of Each Disbursement this Period <b>1010.02</b> <b>Transaction ID : SB17.I5363</b>
City <b>DALLAS</b> State <b>TX</b> Zip Code <b>75202-4295</b>	Purpose of Disbursement <b>PHONE SERVICES</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:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 10 / 2014</b>
Mailing Address <b>208 S AKARD ST</b>		Amount of Each Disbursement this Period <b>511.33</b> <b>Transaction ID : SB17.I5364</b>
City <b>DALLAS</b> State <b>TX</b> Zip Code <b>75202-4295</b>	Purpose of Disbursement <b>PHONE SERVICES</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:		

Full Name (Last, First, Middle Initial) <b>C. BERTRAND AT MISTER A'S</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 25 / 2014</b>
Mailing Address <b>2550 5TH AVE # 12</b> <b># 12</b>		Amount of Each Disbursement this Period <b>295.70</b> <b>Transaction ID : SB17.I5366</b>
City <b>SAN DIEGO</b> State <b>CA</b> Zip Code <b>92103-6612</b>	Purpose of Disbursement <b>FOOD &amp; BEVERAGES</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>1817.05</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. BIGHORN GOLF CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 255 PALOWET DR		Amount of Each Disbursement this Period 159.08 <b>Transaction ID : SB17.I5367</b>
City PALM DESERT State CA Zip Code 92260	Purpose of Disbursement EVENT FOOD & BEVERAGES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BIGHORN GOLF CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 255 PALOWET DR		Amount of Each Disbursement this Period 32.62 <b>Transaction ID : SB17.I5368</b>
City PALM DESERT State CA Zip Code 92260	Purpose of Disbursement EVENT FOOD & BEVERAGES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BIGHORN GOLF CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 255 PALOWET DR		Amount of Each Disbursement this Period 38.70 <b>Transaction ID : SB17.I5369</b>
City PALM DESERT State CA Zip Code 92260	Purpose of Disbursement EVENT FOOD & BEVERAGES	
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).....	230.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. BIGHORN GOLF CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 255 PALOWET DR		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.I5370</b>
City PALM DESERT	State CA Zip Code 92260	
Purpose of Disbursement EVENT FOOD & BEVERAGES	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BILL.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 3200 ASH STREET		Amount of Each Disbursement this Period 59.99 <b>Transaction ID : SB17.I5371</b>
City PALO ALTO	State CA Zip Code 94306	
Purpose of Disbursement ACCOUNTS PAYABLE SERVICES	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BILL.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 3200 ASH STREET		Amount of Each Disbursement this Period 67.24 <b>Transaction ID : SB17.I5372</b>
City PALO ALTO	State CA Zip Code 94306	
Purpose of Disbursement ACCOUNTS PAYABLE SERVICES	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).....	377.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 93		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. BILL.COM</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2014</b>
Mailing Address <b>3200 ASH STREET</b>		Amount of Each Disbursement this Period <b>56.12</b> Transaction ID : <b>SB17.I5373</b>
City <b>PALO ALTO</b> State <b>CA</b> Zip Code <b>94306</b>	Purpose of Disbursement <b>ACCOUNTS PAYABLE SERVICES</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:		

Full Name (Last, First, Middle Initial) <b>B. BLUEJACKET</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 13 / 2014</b>
Mailing Address <b>300 TINGEY ST SE</b>		Amount of Each Disbursement this Period <b>209.95</b> Transaction ID : <b>SB17.I5374</b>
City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20003</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:		

Full Name (Last, First, Middle Initial) <b>C. BOXCAR TAVERN</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 28 / 2014</b>
Mailing Address <b>224 7TH ST SE</b>		Amount of Each Disbursement this Period <b>37.25</b> Transaction ID : <b>SB17.I5376</b>
City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20003-4420</b>	Purpose of Disbursement <b>FOOD &amp; BEVERAGES</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>303.32</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. CAFE 67</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 11 / 2014</b>
Mailing Address <b>12381 MAPLEVIEW ST</b>		Amount of Each Disbursement this Period <b>383.08</b>
City <b>LAKESIDE</b>	State <b>CA</b>	
Zip Code <b>92040-1737</b>	Purpose of Disbursement <b>FOOD &amp; BEVERAGES</b>	<b>Transaction ID : SB17.I5378</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:		

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 25 / 2014</b>
Mailing Address <b>300 FIRST ST SE</b>		Amount of Each Disbursement this Period <b>781.36</b>
City <b>WASHINGTON</b>	State <b>DC</b>	
Zip Code <b>20003</b>	Purpose of Disbursement <b>FOOD &amp; BEVERAGES</b>	<b>Transaction ID : SB17.I5379</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:		

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 20 / 2014</b>
Mailing Address <b>300 FIRST ST SE</b>		Amount of Each Disbursement this Period <b>428.10</b>
City <b>WASHINGTON</b>	State <b>DC</b>	
Zip Code <b>20003</b>	Purpose of Disbursement <b>FOOD &amp; BEVERAGES</b>	<b>Transaction ID : SB17.I5380</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>1592.54</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 300 FIRST ST SE		Amount of Each Disbursement this Period 642.46 <b>Transaction ID : SB17.I5381</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement FOOD & BEVERAGES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 0.25 <b>Transaction ID : SB17.I5382</b>
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement CC PROCESSING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 99.00 <b>Transaction ID : SB17.I5383</b>
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement E-MAIL SERVICE	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).....	741.71
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 24 / 2014</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount of Each Disbursement this Period <b>99.00</b> <b>Transaction ID : SB17.I5384</b>
City <b>FALLS CHURCH</b>	State <b>VA</b> Zip Code <b>22043</b>	
Purpose of Disbursement <b>E-MAIL SERVICE</b>	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 22 / 2014</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount of Each Disbursement this Period <b>823.00</b> <b>Transaction ID : SB17.I5385</b>
City <b>FALLS CHURCH</b>	State <b>VA</b> Zip Code <b>22043</b>	
Purpose of Disbursement <b>DATABASE SERVICES</b>	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 22 / 2014</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount of Each Disbursement this Period <b>823.00</b> <b>Transaction ID : SB17.I5386</b>
City <b>FALLS CHURCH</b>	State <b>VA</b> Zip Code <b>22043</b>	
Purpose of Disbursement <b>DATABASE SERVICES</b>	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1745.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 21 / 2014</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount of Each Disbursement this Period <b>798.00</b> <b>Transaction ID : SB17.I5387</b>
City <b>FALLS CHURCH</b> State <b>VA</b> Zip Code <b>22043</b>	Purpose of Disbursement <b>DATABASE SERVICES</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:		

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 28 / 2014</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount of Each Disbursement this Period <b>99.00</b> <b>Transaction ID : SB17.I5388</b>
City <b>FALLS CHURCH</b> State <b>VA</b> Zip Code <b>22043</b>	Purpose of Disbursement <b>E-MAIL 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:		

Full Name (Last, First, Middle Initial) <b>C. CONGRESSIONAL INSTITUTE, THE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 29 / 2014</b>
Mailing Address <b>1700 DIAGONAL RD._X000D_SUITE 730</b>		Amount of Each Disbursement this Period <b>1423.00</b> <b>Transaction ID : SB17.I5389</b>
City <b>ALEXANDRIA</b> State <b>VA</b> Zip Code <b>22314</b>	Purpose of Disbursement <b>RETREAT</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>2320.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. CONTINENTAL CATERING</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 8238 PARKWAY DR		Amount of Each Disbursement this Period 1712.91
City LA MESA	State CA	
Zip Code 91942	Purpose of Disbursement CATERING	Transaction ID : SB17.I5390
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DELTA AIR LINES</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 1030 DELTA BLVD		Amount of Each Disbursement this Period 390.00
City ATLANTA	State GA	
Zip Code 30320	Purpose of Disbursement AIRFARE	Transaction ID : SB17.I5394
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DELTA AIR LINES</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 1030 DELTA BLVD		Amount of Each Disbursement this Period 464.00
City ATLANTA	State GA	
Zip Code 30320	Purpose of Disbursement AIRFARE	Transaction ID : SB17.I5395
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).....	2566.91
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. DELTA AIR LINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 11 / 2014</b>
Mailing Address <b>1030 DELTA BLVD</b>		Amount of Each Disbursement this Period <b>820.00</b>
City <b>ATLANTA</b>	State <b>GA</b>	
Zip Code <b>30320</b>	Purpose of Disbursement <b>AIRFARE</b>	<b>Transaction ID : SB17.I5396</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:		

Full Name (Last, First, Middle Initial) <b>B. DELTA AIR LINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 10 / 2014</b>
Mailing Address <b>1030 DELTA BLVD</b>		Amount of Each Disbursement this Period <b>1051.00</b>
City <b>ATLANTA</b>	State <b>GA</b>	
Zip Code <b>30320</b>	Purpose of Disbursement <b>AIRFARE</b>	<b>Transaction ID : SB17.I5397</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:		

Full Name (Last, First, Middle Initial) <b>C. DELTA AIR LINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 10 / 2014</b>
Mailing Address <b>1030 DELTA BLVD</b>		Amount of Each Disbursement this Period <b>25.00</b>
City <b>ATLANTA</b>	State <b>GA</b>	
Zip Code <b>30320</b>	Purpose of Disbursement <b>AIRLINE CHARGES</b>	<b>Transaction ID : SB17.I5398</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>1896.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. DELTA AIR LINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 11 / 2014</b>
Mailing Address <b>1030 DELTA BLVD</b>		Amount of Each Disbursement this Period <b>25.00</b>
City <b>ATLANTA</b>	State <b>GA</b>	
Zip Code <b>30320</b>	Purpose of Disbursement <b>AIRLINE CHARGES</b>	<b>Transaction ID : SB17.I5399</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:		

Full Name (Last, First, Middle Initial) <b>B. ELECTION CFO, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 28 / 2014</b>
Mailing Address <b>P.O. BOX 26141</b>		Amount of Each Disbursement this Period <b>9735.48</b>
City <b>ALEXANDRIA</b>	State <b>VA</b>	
Zip Code <b>22313</b>	Purpose of Disbursement <b>COMPLIANCE CONSULTING; CONSULTANT EXPENSES</b>	<b>Transaction ID : SB17.I5401</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:		

Full Name (Last, First, Middle Initial) <b>C. ESCONDIDO CHAMBER OF COMMERCE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 27 / 2014</b>
Mailing Address <b>720 N BROADWAY</b>		Amount of Each Disbursement this Period <b>30.00</b>
City <b>ESCONDIDO</b>	State <b>CA</b>	
Zip Code <b>92025-1870</b>	Purpose of Disbursement <b>EVENT TICKET</b>	<b>Transaction ID : SB17.I5402</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>9790.48</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. ESCONDIDO CHAMBER OF COMMERCE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 25 / 2014</b>
Mailing Address <b>720 N BROADWAY</b>		Amount of Each Disbursement this Period <b>300.00</b> <b>Transaction ID : SB17.I5403</b>
City <b>ESCONDIDO</b> State <b>CA</b> Zip Code <b>92025-1870</b>	Purpose of Disbursement <b>MEMBERSHIP</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:		

Full Name (Last, First, Middle Initial) <b>B. FALLBROOK CHAMBER OF COMMERCE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 27 / 2014</b>
Mailing Address <b>111 S MAIN AVE</b>		Amount of Each Disbursement this Period <b>125.00</b> <b>Transaction ID : SB17.I5404</b>
City <b>FALLBROOK</b> State <b>CA</b> Zip Code <b>92028</b>	Purpose of Disbursement <b>ADVERTISING</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:		

Full Name (Last, First, Middle Initial) <b>C. FALLBROOK CHAMBER OF COMMERCE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 25 / 2014</b>
Mailing Address <b>111 S MAIN AVE</b>		Amount of Each Disbursement this Period <b>100.00</b> <b>Transaction ID : SB17.I5405</b>
City <b>FALLBROOK</b> State <b>CA</b> Zip Code <b>92028</b>	Purpose of Disbursement <b>MEMBERSHIP</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>525.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A. FEDERAL EXPRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 22 / 2014

Amount of Each Disbursement this Period: 223.10

Transaction ID : SB17.I5406

**B. FEDERAL EXPRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 25 / 2014

Amount of Each Disbursement this Period: 74.63

Transaction ID : SB17.I5407

**C. FEDERAL EXPRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 24 / 2014

Amount of Each Disbursement this Period: 74.79

Transaction ID : SB17.I5408

**SUBTOTAL** of Disbursements This Page (optional) ..... 372.52

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. GILLIARD BLANNING AND ASSOCIATES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 09 / 2014</b>
Mailing Address <b>5701 LONETREE BLVD_X000D_STE 301 STE 301</b>		Amount of Each Disbursement this Period <b>750.00</b> <b>Transaction ID : SB17.I5410</b>
City <b>ROCKLIN</b> State <b>CA</b> Zip Code <b>95765-3796</b>	Purpose of Disbursement <b>CAMPAIGN CONSULTING</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:		

Full Name (Last, First, Middle Initial) <b>B. GILLIARD BLANNING AND ASSOCIATES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 03 / 2014</b>
Mailing Address <b>5701 LONETREE BLVD_X000D_STE 301 STE 301</b>		Amount of Each Disbursement this Period <b>750.00</b> <b>Transaction ID : SB17.I5411</b>
City <b>ROCKLIN</b> State <b>CA</b> Zip Code <b>95765-3796</b>	Purpose of Disbursement <b>CAMPAIGN CONSULTING</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:		

Full Name (Last, First, Middle Initial) <b>C. GILLIARD BLANNING AND ASSOCIATES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 18 / 2014</b>
Mailing Address <b>5701 LONETREE BLVD_X000D_STE 301 STE 301</b>		Amount of Each Disbursement this Period <b>750.00</b> <b>Transaction ID : SB17.I5412</b>
City <b>ROCKLIN</b> State <b>CA</b> Zip Code <b>95765-3796</b>	Purpose of Disbursement <b>CAMPAIGN CONSULTING</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>2250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial)  
**A. GILLIARD BLANNING AND ASSOCIATES**

Mailing Address 5701 LONETREE BLVD\_X000D\_STE 301  
STE 301

City ROCKLIN State CA Zip Code 95765-3796

Purpose of Disbursement  
CAMPAIGN CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 07 / 2014

Amount of Each Disbursement this Period  
5792.00

Transaction ID : SB17.I5413

Full Name (Last, First, Middle Initial)  
**B. GILLIARD BLANNING AND ASSOCIATES**

Mailing Address 5701 LONETREE BLVD\_X000D\_STE 301  
STE 301

City ROCKLIN State CA Zip Code 95765-3796

Purpose of Disbursement  
PRINTING & POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 03 / 2014

Amount of Each Disbursement this Period  
3141.00

Transaction ID : SB17.I5414

Full Name (Last, First, Middle Initial)  
**C. GILLIARD BLANNING AND ASSOCIATES**

Mailing Address 5701 LONETREE BLVD\_X000D\_STE 301  
STE 301

City ROCKLIN State CA Zip Code 95765-3796

Purpose of Disbursement  
PRINTING & POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
2170.55

Transaction ID : SB17.I5415

**SUBTOTAL** of Disbursements This Page (optional)..... 11103.55

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. GRASSHOPPER GROUP LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 09 / 2014</b>
Mailing Address <b>197 1ST AVE #200</b>		Amount of Each Disbursement this Period <b>33.04</b> <b>Transaction ID : SB17.I5416</b>
City <b>NEEDHAM</b>	State <b>MA</b>	
Zip Code <b>02494</b>	Purpose of Disbursement <b>PHONE SERVICES</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:	

Full Name (Last, First, Middle Initial) <b>B. GRASSHOPPER GROUP LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 11 / 2014</b>
Mailing Address <b>197 1ST AVE #200</b>		Amount of Each Disbursement this Period <b>31.65</b> <b>Transaction ID : SB17.I5417</b>
City <b>NEEDHAM</b>	State <b>MA</b>	
Zip Code <b>02494</b>	Purpose of Disbursement <b>PHONE SERVICES</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:	

Full Name (Last, First, Middle Initial) <b>C. GRASSHOPPER GROUP LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 10 / 2014</b>
Mailing Address <b>197 1ST AVE #200</b>		Amount of Each Disbursement this Period <b>28.36</b> <b>Transaction ID : SB17.I5418</b>
City <b>NEEDHAM</b>	State <b>MA</b>	
Zip Code <b>02494</b>	Purpose of Disbursement <b>PHONE SERVICES</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>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>93.05</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. HAWK AND DOVE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 329 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 113.22 <b>Transaction ID : SB17.I5423</b>
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement FOOD & BEVERAGES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HILTON</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 7930 JONES BRANCH DR #1100		Amount of Each Disbursement this Period 110.64 <b>Transaction ID : SB17.I5425</b>
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement ACCOMMODATIONS	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. HILTON</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 7930 JONES BRANCH DR #1100		Amount of Each Disbursement this Period 114.64 <b>Transaction ID : SB17.I5426</b>
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement ACCOMMODATIONS	
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).....	338.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. HYATT</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 71 S. WACKER DR		Amount of Each Disbursement this Period 16.70 <b>Transaction ID : SB17.I5436</b>
City CHICAGO	State IL	
Zip Code 60606	Purpose of Disbursement ACCOMMODATIONS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. JCA COMMUNICATIONS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 3755 AVOCADO BLVD_X000D_#145		Amount of Each Disbursement this Period 135.00 <b>Transaction ID : SB17.I5439</b>
City LA MESA	State CA	
Zip Code 91941	Purpose of Disbursement PRINTING & SHIPPING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. JOHN DOUGLAS BUCHANAN</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 6606 OMEGA DR		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : SB17.I5440</b>
City SAN DIEGO	State CA	
Zip Code 92139	Purpose of Disbursement EVENT ENTERTAINMENT	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).....	501.70
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. JOHN DOUGLAS BUCHANAN</b>			Date of Disbursement M M / D D / Y Y Y Y <b>01 / 13 / 2014</b>	
Mailing Address <b>6606 OMEGA DR</b>			Amount of Each Disbursement this Period <b>50.00</b>	
City <b>SAN DIEGO</b>	State <b>CA</b>	Zip Code <b>92139</b>	Transaction ID : <b>SB17.I5441</b>	
Purpose of Disbursement <b>EVENT ENTERTAINMENT</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:				

Full Name (Last, First, Middle Initial) <b>B. LA QUINTA RESORT &amp; CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y <b>03 / 20 / 2014</b>	
Mailing Address <b>49-499 EISENHOWER DR.</b>			Amount of Each Disbursement this Period <b>554.20</b>	
City <b>LA QUINTA</b>	State <b>CA</b>	Zip Code <b>09253</b>	Transaction ID : <b>SB17.I5443</b>	
Purpose of Disbursement <b>LODGING, FOOD AND BEVERAGES</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:				

Full Name (Last, First, Middle Initial) <b>C. LA QUINTA RESORT &amp; CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y <b>03 / 20 / 2014</b>	
Mailing Address <b>49-499 EISENHOWER DR.</b>			Amount of Each Disbursement this Period <b>832.28</b>	
City <b>LA QUINTA</b>	State <b>CA</b>	Zip Code <b>09253</b>	Transaction ID : <b>SB17.I5444</b>	
Purpose of Disbursement <b>LODGING, FOOD AND BEVERAGES</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>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1436.48</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 93			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. LAKESIDE CHAMBER OF COMMERCE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 9924 VINE ST		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.I5445</b>
City LAKESIDE State CA Zip Code 92040-3121	Purpose of Disbursement ADVERTISING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LAKESIDE CHAMBER OF COMMERCE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 9924 VINE ST		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : SB17.I5446</b>
City LAKESIDE State CA Zip Code 92040-3121	Purpose of Disbursement MEMBERSHIP	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LODGE AT TORREY PINES</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 11480 N TORREY PINES RD		Amount of Each Disbursement this Period 43.31 <b>Transaction ID : SB17.I5447</b>
City LA JOLLA State CA Zip Code 92037	Purpose of Disbursement FOOD & BEVERAGES	
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).....	268.31
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. LODGE AT TORREY PINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 19 / 2014</b>
Mailing Address 11480 N TORREY PINES RD		Amount of Each Disbursement this Period <b>51.50</b>
City LA JOLLA State CA Zip Code 92037	Purpose of Disbursement FOOD & BEVERAGES	
Candidate Name	Category/Type	<b>Transaction ID : SB17.I5448</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LODGE AT TORREY PINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 19 / 2014</b>
Mailing Address 11480 N TORREY PINES RD		Amount of Each Disbursement this Period <b>124.76</b>
City LA JOLLA State CA Zip Code 92037	Purpose of Disbursement FOOD & BEVERAGES	
Candidate Name	Category/Type	<b>Transaction ID : SB17.I5449</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MATCHBOX RESTAURANT</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 06 / 2014</b>
Mailing Address 713 H ST., NW		Amount of Each Disbursement this Period <b>100.78</b>
City WASHINGTON State DC Zip Code 20001	Purpose of Disbursement FOOD & BEVERAGES	
Candidate Name	Category/Type	<b>Transaction ID : SB17.I5450</b>
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>277.04</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. MERCHANT E-SOLUTIONS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 04 / 2014</b>
Mailing Address <b>3600 BRIDGE PARKWAY SUITE 102</b>		Amount of Each Disbursement this Period <b>85.89</b>
City <b>REDWOOD CITY</b> State <b>CA</b> Zip Code <b>94065</b>	Purpose of Disbursement <b>CC PROCESSING</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)	<b>Transaction ID : SB17.I5451</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MERCHANT E-SOLUTIONS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 04 / 2014</b>
Mailing Address <b>3600 BRIDGE PARKWAY SUITE 102</b>		Amount of Each Disbursement this Period <b>62.09</b>
City <b>REDWOOD CITY</b> State <b>CA</b> Zip Code <b>94065</b>	Purpose of Disbursement <b>CC PROCESSING</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)	<b>Transaction ID : SB17.I5452</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MERCHANT E-SOLUTIONS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 04 / 2014</b>
Mailing Address <b>3600 BRIDGE PARKWAY SUITE 102</b>		Amount of Each Disbursement this Period <b>56.67</b>
City <b>REDWOOD CITY</b> State <b>CA</b> Zip Code <b>94065</b>	Purpose of Disbursement <b>CC PROCESSING</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)	<b>Transaction ID : SB17.I5453</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>204.65</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. MOLLY MALONE'S</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 14 / 2014</b>
Mailing Address <b>713 8TH ST SE</b>		Amount of Each Disbursement this Period <b>22.60</b>
City <b>WASHINGTON</b>	State <b>DC</b>	
Zip Code <b>20003-2802</b>	Purpose of Disbursement <b>FOOD &amp; BEVERAGES</b>	<b>Transaction ID : SB17.I5455</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:		

Full Name (Last, First, Middle Initial) <b>B. ORFILA VINEYARDS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 13 / 2014</b>
Mailing Address <b>13455 SAN PASQUAL RD</b>		Amount of Each Disbursement this Period <b>2171.58</b>
City <b>ESCONDIDO</b>	State <b>CA</b>	
Zip Code <b>92025</b>	Purpose of Disbursement <b>EVENT VENUE RENTAL</b>	<b>Transaction ID : SB17.I5458</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:		

Full Name (Last, First, Middle Initial) <b>C. RIVERSIDE COUNTY REGISTRAR OF VOTERS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 07 / 2014</b>
Mailing Address <b>2724 GATEWAY DR</b>		Amount of Each Disbursement this Period <b>900.00</b>
City <b>RIVERSIDE</b>	State <b>CA</b>	
Zip Code <b>92507</b>	Purpose of Disbursement <b>FILING FEE</b>	<b>Transaction ID : SB17.I5462</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>3094.18</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial)  
**A. SAN DIEGO COUNTY REGISTRAR OF VOTERS**

Mailing Address PO BOX 85656

City SAN DIEGO State CA Zip Code 92186

Purpose of Disbursement FILING FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
02 / 07 / 2014

Amount of Each Disbursement this Period: 1685.00

Transaction ID : SB17.I5465

Category/Type

Full Name (Last, First, Middle Initial)  
**B. SAN MARCOS CHAMBER OF COMMERCE**

Mailing Address 904 W SAN MARCOS BLVD\_X000D\_STE 1 STE 10

City SAN MARCOS State CA Zip Code 92078-1118

Purpose of Disbursement ADVERTISING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
03 / 04 / 2014

Amount of Each Disbursement this Period: 200.00

Transaction ID : SB17.I5467

Category/Type

Full Name (Last, First, Middle Initial)  
**C. SAN MARCOS CHAMBER OF COMMERCE**

Mailing Address 904 W SAN MARCOS BLVD\_X000D\_STE 1 STE 10

City SAN MARCOS State CA Zip Code 92078-1118

Purpose of Disbursement EVENT TICKETS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
02 / 27 / 2014

Amount of Each Disbursement this Period: 75.00

Transaction ID : SB17.I5468

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 1960.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. SAN MARCOS CHAMBER OF COMMERCE</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 904 W SAN MARCOS BLVD_X000D_STE 1 STE 10			Amount of Each Disbursement this Period 239.00 <b>Transaction ID : SB17.I5469</b>
City SAN MARCOS	State CA	Zip Code 92078-1118	
Purpose of Disbursement MEMBERSHIP	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. SANTEE CHAMBER OF COMMERCE</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 10315 MISSION GORGE RD			Amount of Each Disbursement this Period 60.00 <b>Transaction ID : SB17.I5470</b>
City SANTEE	State CA	Zip Code 92071-3031	
Purpose of Disbursement EVENT TICKET	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. SANTEE CHAMBER OF COMMERCE</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 10315 MISSION GORGE RD			Amount of Each Disbursement this Period 220.00 <b>Transaction ID : SB17.I5471</b>
City SANTEE	State CA	Zip Code 92071-3031	
Purpose of Disbursement MEMBERSHIP	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).....	519.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 84 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. SANTEE CHAMBER OF COMMERCE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 01 / 2014</b>
Mailing Address 10315 MISSION GORGE RD		Amount of Each Disbursement this Period <b>300.00</b>
City SANTEE	State CA	
Zip Code 92071-3031	Purpose of Disbursement STREET FAIR BOOTH	<b>Transaction ID : SB17.I5472</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:		

Full Name (Last, First, Middle Initial) <b>B. SECRETARY OF STATE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 07 / 2014</b>
Mailing Address 1500 11TH ST		Amount of Each Disbursement this Period <b>1740.00</b>
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement FILING FEE	<b>Transaction ID : SB17.I5474</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:		

Full Name (Last, First, Middle Initial) <b>C. TEMECULA CREEK INN</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 13 / 2014</b>
Mailing Address 44501 RAINBOW CANYON RD.		Amount of Each Disbursement this Period <b>200.00</b>
City TEMECULA	State CA	
Zip Code 92592-5947	Purpose of Disbursement ACCOMMODATIONS	<b>Transaction ID : SB17.I5476</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>2240.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 85 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. TEMECULA CREEK INN</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 24 / 2014</b>
Mailing Address <b>44501 RAINBOW CANYON RD.</b>		Amount of Each Disbursement this Period <b>304.89</b> <b>Transaction ID : SB17.I5477</b>
City <b>TEMECULA</b>	State <b>CA</b>	
Zip Code <b>92592-5947</b>	Purpose of Disbursement <b>ACCOMMODATIONS</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:	

Full Name (Last, First, Middle Initial) <b>B. TEMECULA VALLEY CHAMBER OF COMMERCE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 25 / 2014</b>
Mailing Address <b>26790 YNEZ CT</b>		Amount of Each Disbursement this Period <b>325.00</b> <b>Transaction ID : SB17.I5478</b>
City <b>TEMECULA</b>	State <b>CA</b>	
Zip Code <b>92591-5607</b>	Purpose of Disbursement <b>MEMBERSHIP</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:	

Full Name (Last, First, Middle Initial) <b>C. THE GULA GRAHAM GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 03 / 2014</b>
Mailing Address <b>499 S CAPITOL ST SW STE 420</b>		Amount of Each Disbursement this Period <b>13420.00</b> <b>Transaction ID : SB17.I5482</b>
City <b>WASHINGTON</b>	State <b>DC</b>	
Zip Code <b>20003</b>	Purpose of Disbursement <b>FUNDRAISING CONSULTANT</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>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>14049.89</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A. THE GULA GRAHAM GROUP**

Full Name (Last, First, Middle Initial)  
Mailing Address 499 S CAPITOL ST SW STE 420

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
FUNDRAISING CONSULTANT EXPENSES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 14 / 2014

Amount of Each Disbursement this Period  
1099.80

Transaction ID : SB17.I5483

**B. THE GULA GRAHAM GROUP**

Full Name (Last, First, Middle Initial)  
Mailing Address 499 S CAPITOL ST SW STE 420

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
FUNDRAISING CONSULTANT EXPENSES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 14 / 2014

Amount of Each Disbursement this Period  
2638.00

Transaction ID : SB17.I5484

**C. THE GULA GRAHAM GROUP**

Full Name (Last, First, Middle Initial)  
Mailing Address 499 S CAPITOL ST SW STE 420

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
FUNDRAISING CONSULTANT EXPENSES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
02 / 03 / 2014

Amount of Each Disbursement this Period  
3898.35

Transaction ID : SB17.I5485

**SUBTOTAL** of Disbursements This Page (optional)..... 7636.15

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. THE GULA GRAHAM GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 10 / 2014</b>
Mailing Address <b>499 S CAPITOL ST SW STE 420</b>		Amount of Each Disbursement this Period <b>5958.76</b> <b>Transaction ID : SB17.I5486</b>
City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20003</b>	Purpose of Disbursement <b>FUNDRAISING CONSULTANT EXPENSES</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:		

Full Name (Last, First, Middle Initial) <b>B. TORREY PINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 19 / 2014</b>
Mailing Address <b>11480 TORREY PINES PARD RD</b>		Amount of Each Disbursement this Period <b>160.92</b> <b>Transaction ID : SB17.I5488</b>
City <b>SAN DIEGO</b> State <b>CA</b> Zip Code <b>92037</b>	Purpose of Disbursement <b>FUNDRAISING EVENT EXPENSE</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:		

Full Name (Last, First, Middle Initial) <b>C. TORREY PINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 19 / 2014</b>
Mailing Address <b>11480 TORREY PINES PARD RD</b>		Amount of Each Disbursement this Period <b>458.00</b> <b>Transaction ID : SB17.I5489</b>
City <b>SAN DIEGO</b> State <b>CA</b> Zip Code <b>92037</b>	Purpose of Disbursement <b>FUNDRAISING EVENT EXPENSE</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>6577.68</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 93		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2014
Mailing Address 77 W WACKER DR		Amount of Each Disbursement this Period 898.00
City CHICAGO	State IL	
Zip Code 60601-1604	Purpose of Disbursement AIRFARE	Transaction ID : SB17.I5492
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 77 W WACKER DR		Amount of Each Disbursement this Period 858.00
City CHICAGO	State IL	
Zip Code 60601-1604	Purpose of Disbursement AIRFARE	Transaction ID : SB17.I5493
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 77 W WACKER DR		Amount of Each Disbursement this Period 94.00
City CHICAGO	State IL	
Zip Code 60601-1604	Purpose of Disbursement AIRFARE	Transaction ID : SB17.I5494
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).....	1850.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 93		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 04 / 2014</b>
Mailing Address <b>77 W WACKER DR</b>		Amount of Each Disbursement this Period <b>228.00</b> Transaction ID : <b>SB17.I5495</b>
City <b>CHICAGO</b>	State <b>IL</b>	
Zip Code <b>60601-1604</b>	Purpose of Disbursement <b>AIRFARE</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:	

Full Name (Last, First, Middle Initial) <b>B. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 25 / 2014</b>
Mailing Address <b>77 W WACKER DR</b>		Amount of Each Disbursement this Period <b>74.00</b> Transaction ID : <b>SB17.I5496</b>
City <b>CHICAGO</b>	State <b>IL</b>	
Zip Code <b>60601-1604</b>	Purpose of Disbursement <b>AIRLINE CHARGES</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:	

Full Name (Last, First, Middle Initial) <b>C. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 28 / 2014</b>
Mailing Address <b>77 W WACKER DR</b>		Amount of Each Disbursement this Period <b>74.00</b> Transaction ID : <b>SB17.I5497</b>
City <b>CHICAGO</b>	State <b>IL</b>	
Zip Code <b>60601-1604</b>	Purpose of Disbursement <b>AIRLINE CHARGES</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>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>376.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 90 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 04 / 2014</b>
Mailing Address <b>77 W WACKER DR</b>		Amount of Each Disbursement this Period <b>32.00</b> <b>Transaction ID : SB17.I5498</b>
City <b>CHICAGO</b> State <b>IL</b> Zip Code <b>60601-1604</b>	Purpose of Disbursement <b>AIRLINE CHARGES</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:		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 04 / 2014</b>
Mailing Address <b>475 L'ENFANT PLZ</b>		Amount of Each Disbursement this Period <b>406.00</b> <b>Transaction ID : SB17.I5500</b>
City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20024</b>	Purpose of Disbursement <b>POSTAGE</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:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>438.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>98151.93</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 91 OF 93	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. BOBBY SCHILLING FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 27 / 2014</b>
Mailing Address <b>367 AVENUE OF THE CITIES, #D</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : SB21.I5514</b>
City <b>EAST MOLINE</b>	State <b>IL</b>	
Zip Code <b>61244-4053</b>	Purpose of Disbursement <b>CONTRIBUTION</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:	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAVID JOLLY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 28 / 2014</b>
Mailing Address <b>PO BOX 1158</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : SB21.I5509</b>
City <b>INDIAN ROCKS BEACH</b>	State <b>FL</b>	
Zip Code <b>33785</b>	Purpose of Disbursement <b>CONTRIBUTION</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:	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF JOE HECK</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 27 / 2014</b>
Mailing Address <b>P.O. BOX 750114</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : SB21.I5510</b>
City <b>LAS VEGAS</b>	State <b>NV</b>	
Zip Code <b>89136</b>	Purpose of Disbursement <b>CONTRIBUTION</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>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 93	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

**A. HALL FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 711

City ROCKWALL State TX Zip Code 75087

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 27 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.I5511

**B. MICHAEL GRIMM FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 61806

City STATEN ISLAND State NY Zip Code 10306-7806

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 10 / 2014

Amount of Each Disbursement this Period: 1500.00

Transaction ID : SB21.I5512

**C. STRICKLAND FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 630446

City SIMI VALLEY State CA Zip Code 93063

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 10 / 2014

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB21.I5513

**SUBTOTAL** of Disbursements This Page (optional) ..... 4500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 93
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. REPUBLICAN PARTY OF RIVERSIDE COUNTY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 27 / 2014</b>
Mailing Address <b>P.O. BOX 20091</b>		Amount of Each Disbursement this Period <b>5000.00</b> <b>Transaction ID : SB21.I5508</b>
City <b>RIVERSIDE</b>	State <b>CA</b>	
Zip Code <b>92516-0091</b>	Purpose of Disbursement <b>CONTRIBUTION</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:	

Full Name (Last, First, Middle Initial) <b>B. REPUBLICAN PARTY OF SAN DIEGO COUNTY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 18 / 2014</b>
Mailing Address <b>P.O. BOX 501278</b>		Amount of Each Disbursement this Period <b>5000.00</b> <b>Transaction ID : SB21.I5526</b>
City <b>SAN DIEGO</b>	State <b>CA</b>	
Zip Code <b>92150-1278</b>	Purpose of Disbursement <b>CONTRIBUTION</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:	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>10000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>17500.00</b>