

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

Susan Adams for Congress

ADDRESS (number and street) ▼

PO Box 4429

Check if different than previously reported. (ACC)

San Rafael

CA

94913

2. **FEC IDENTIFICATION NUMBER** ▼

C C00497222

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

CA

02

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 / / in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Tamara Hull

Signature of Treasurer Tamara Hull

[Electronically Filed]

Date

/ /

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Susan Adams 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))....	28549.16	113642.84
(b) Total Contribution Refunds (from Line 20(d))	1000.00	1025.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	27549.16	112617.84
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	47988.10	72563.49
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	47988.10	72563.49
8. Cash on Hand at Close of Reporting Period (from Line 27).....	39904.35	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY 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

Susan Adams 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).....	12239.15	66708.15
(ii) Unitemized.....	11596.00	38075.68
(iii) TOTAL of contributions from individuals ▶	23835.15	104783.83
(b) Political Party Committees.....	4.01	4.01
(c) Other Political Committees (such as PACs).....	4710.00	6985.00
(d) The Candidate.....	0.00	1870.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	28549.16	113642.84
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.)	0.00	0.00
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)..... ▶	28549.16	113642.84

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	47988.10	72563.49
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	25.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000.00	1025.00
21. OTHER DISBURSEMENTS	150.00	150.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	49138.10	73738.49

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	60493.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	28549.16
25. SUBTOTAL (add Line 23 and Line 24).....	89042.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	49138.10
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	39904.35

**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 55
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. June Adams		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 2683-46th Ave		Transaction ID : C5773836
City San Francisco	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 305.00	

Full Name (Last, First, Middle Initial) B. Mitch Barker		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 02 / 2011
Mailing Address 129 Via Nice		Transaction ID : C5788920
City Newport Beach	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer PARS	Occupation Exec. V.P.	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Marjorie Barter		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 04 / 2011
Mailing Address 7 Vendola Drive		Transaction ID : C5777177
City San Rafael	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 110.00
Name of Employer USF School of Nursing	Occupation Professor and Chair-Graduate Departmen	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 335.00	

SUBTOTAL of Receipts This Page (optional).....	415.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 55
	<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)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Christine Bronstein

Mailing Address 17 Treetop Way

City Kentfield State CA Zip Code 94904-2626

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

Name of Employer Self Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2011

Transaction ID : C5796921

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 85 Main Dr

City San Rafael State CA Zip Code 94901-2517

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2011

Transaction ID : C6189417

Amount of Each Receipt this Period
 55.00

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

Mailing Address 581 San Pedro Cove

City San Rafael State CA Zip Code 94901

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

Name of Employer Self Occupation Business Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2011

Transaction ID : C5753663

Amount of Each Receipt this Period
 250.00

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

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

1305.00

**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 55
	<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)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Cameron Case

Mailing Address 596 Miller Creek Rd

City San Rafael State CA Zip Code 94903-1320

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

Name of Employer Self Occupation Sales

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **205.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2011

Transaction ID : C5774366

Amount of Each Receipt this Period
55.00

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

Mailing Address 44 La Crescenta Way

City San Rafael State CA Zip Code 94901-4213

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

Name of Employer Capital Strategies Group, LLC Occupation Financial Advisor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2011

Transaction ID : C5753450

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Karen Crockett

Mailing Address 82 Creekside Dr

City San Rafael State CA Zip Code 94903-1055

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

Name of Employer IBM Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **660.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2011

Transaction ID : C5769772

Amount of Each Receipt this Period
110.00

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

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

665.00

**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 55
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Nona Dennis		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 69 Marlin Avenue		Transaction ID : C5773838
City Mill Valley	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer N/A	Occupation retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 555.00	

Full Name (Last, First, Middle Initial) B. Aimi Dutra Krause		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 30 / 2011
Mailing Address 1000 Pt. San Pedro Road		Transaction ID : C6186093
City San Rafael	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 950.00
Name of Employer The Dutra Group	Occupation Community Relations	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2550.00	

Full Name (Last, First, Middle Initial) C. Aimi Dutra Krause		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 30 / 2011
Mailing Address 1000 Pt. San Pedro Road		Transaction ID : C6186095
City San Rafael	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer The Dutra Group	Occupation Community Relations	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2550.00	

SUBTOTAL of Receipts This Page (optional).....	1055.00
TOTAL This Period (last page this line number only).....	

**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)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Susan Adams for Congress

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

Mailing Address 24 Great Circle Dr

City Mill Valley State CA Zip Code 94941-3257

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

Name of Employer retired Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2011

Transaction ID : C5748782

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
T Gallo

Mailing Address 1032 Capp St # A

City San Francisco State CA Zip Code 94110-3919

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

Name of Employer SFGH Occupation RN

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2011

Transaction ID : C5774398

Amount of Each Receipt this Period
 110.00

C. Full Name (Last, First, Middle Initial)
T Gallo

Mailing Address 1032 Capp St # A

City San Francisco State CA Zip Code 94110-3919

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

Name of Employer SFGH Occupation RN

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2011

Transaction ID : C5777110

Amount of Each Receipt this Period
 218.00

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

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

578.00

**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 55
	<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)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Joseph Garbarino Sr.

Mailing Address 111 Manderly Rd

City San Rafael State CA Zip Code 94901-2470

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

Name of Employer Marin Sanitary Occupation EVP

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2011

Transaction ID : C5791387

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Joseph John Garbarino

Mailing Address 30 Lochinvar Rd

City San Rafael State CA Zip Code 94901-2477

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

Name of Employer Marin Sanitary Service Occupation Chairman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2011

Transaction ID : C5791386

Amount of Each Receipt this Period
500.00

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

Mailing Address 2 Seabreeze Dr

City Richmond State CA Zip Code 94804-7410

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

Name of Employer Contra Costa County Occupation Supervisor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2011

Transaction ID : C5799314

Amount of Each Receipt this Period
250.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 11 OF 55
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Brenda Goosby

Mailing Address 4619 Florence Pl

City State Zip Code
Eureka CA 95503-9730

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

Name of Employer Occupation
Mad River Community Hospital Director of Home Health

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 16 / 2011

Transaction ID : C5782968

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Brenda Goosby

Mailing Address 4619 Florence Pl

City State Zip Code
Eureka CA 95503-9730

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

Name of Employer Occupation
Mad River Community Hospital Director of Home Health

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 22 / 2011

Transaction ID : C5786412

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Brenda Goosby

Mailing Address 4619 Florence Pl

City State Zip Code
Eureka CA 95503-9730

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

Name of Employer Occupation
Mad River Community Hospital Director of Home Health

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 14 / 2011

Transaction ID : C5796748

Amount of Each Receipt this Period
25.00

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

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

175.00

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

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

FOR LINE NUMBER: PAGE 12 OF 55
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Brenda Goosby

Mailing Address 4619 Florence Pl

City State Zip Code
Eureka CA 95503-9730

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

Name of Employer Occupation
Mad River Community Hospital Director of Home Health

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2011

Transaction ID : C6161581

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Lorraine Grace

Mailing Address 6 Playa Verde

City State Zip Code
Tiburon CA 94920-1122

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

Name of Employer Occupation
Self Educator

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2011

Transaction ID : C5754676

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Blair Gray

Mailing Address 294 Arias Street

City State Zip Code
San Rafael CA 94903

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

Name of Employer Occupation
N/A Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2011

Transaction ID : C5774330

Amount of Each Receipt this Period
50.00

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

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

1100.00

**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)
 11a 11b 11c 11d
 12 13a 13b 14 15
 PAGE 13 OF 55

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NAME OF COMMITTEE (In Full)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
William Hamm

Mailing Address 13 Crestwood Drive

City San Rafael State CA Zip Code 94903

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

Name of Employer Self Occupation Videographer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 04 / 2011

Transaction ID : C5777206

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Benjamin Hammett

Mailing Address 301 Lowell Ave

City Palo Alto State CA Zip Code 94301-3812

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

Name of Employer Self Occupation Physiologist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 20 / 2011

Transaction ID : C5835891

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Laura Kantorowski

Mailing Address 39 Pleasant Ln

City San Rafael State CA Zip Code 94901-5048

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

Name of Employer Bay Area Community Resources Occupation Psychologist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **236.15**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 04 / 2011

Transaction ID : C5777212

Amount of Each Receipt this Period
45.00

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

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

645.00

**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 55
	<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)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Laura Kantorowski

Mailing Address 39 Pleasant Ln

City San Rafael State CA Zip Code 94901-5048

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

Name of Employer Bay Area Community Resources Occupation Psychologist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
236.15

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 04 / 2011

Transaction ID : C6188756

Amount of Each Receipt this Period
91.15

* In-Kind: event supplies

B. Full Name (Last, First, Middle Initial)
Judith Karshmer

Mailing Address 22 Chabot Ter

City San Francisco State CA Zip Code 94118

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

Name of Employer USF Occupation Dean And Professor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 06 / 2011

Transaction ID : C5777757

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Jack Krystal

Mailing Address 1299 4th St #202

City San Rafael State CA Zip Code 94901

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

Name of Employer Diversified Realty Services Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 28 / 2011

Transaction ID : C5787934

Amount of Each Receipt this Period
250.00

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

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

591.15

**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 55
	<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)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Jennifer Loucks

Mailing Address 368 Riviera Dr

City San Rafael State CA Zip Code 94901-1529

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

Name of Employer AAA NCNU Insurance Exchange Occupation Human Resources

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 21 / 2011

Transaction ID : C5785083

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Lee Markrack

Mailing Address 3 Geneva Way

City San Rafael State CA Zip Code 94903-2969

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

Name of Employer Self Employed Occupation Marketing

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **205.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 04 / 2011

Transaction ID : C5777192

Amount of Each Receipt this Period
55.00

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

Mailing Address 711 Del Ganado Road

City San Rafael State CA Zip Code 94903

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 31 / 2011

Transaction ID : C5773841

Amount of Each Receipt this Period
110.00

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

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

190.00

**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 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Barbara Matas

Mailing Address 23 Sequoia Glen Ln

City Novato State CA Zip Code 94947-5175

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

Name of Employer Kindred Smith Ranch Occupation RN

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **380.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 04 / 2011

Transaction ID : C5777048

Amount of Each Receipt this Period
55.00

B. Full Name (Last, First, Middle Initial)
Barbara Matas

Mailing Address 23 Sequoia Glen Ln

City Novato State CA Zip Code 94947-5175

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

Name of Employer Kindred Smith Ranch Occupation RN

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **380.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : C6162189

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Charles Minton

Mailing Address 1885 Golf Course Rd

City Bayside State CA Zip Code 95524-9322

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 12 / 2011

Transaction ID : C5795591

Amount of Each Receipt this Period
500.00

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

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

605.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 17 OF 55

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NAME OF COMMITTEE (In Full)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Matthew Owen

Mailing Address 2609 U St

City State Zip Code
 Eureka CA 95501

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

Name of Employer Occupation
 Wells Fargo Home Mortgage Home Mortgage Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : C5792239

Amount of Each Receipt this Period
 500.00

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

Mailing Address 223 Southern Heights

City State Zip Code
 San Rafael CA 94901

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

Name of Employer Occupation
 N/A Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 410.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2011

Transaction ID : C5777184

Amount of Each Receipt this Period
 110.00

C. Full Name (Last, First, Middle Initial)
Marti Rule

Mailing Address 20 Oak Mountain Ct

City State Zip Code
 San Rafael CA 94903-1038

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

Name of Employer Occupation
 Self-employed Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 235.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : C6162222

Amount of Each Receipt this Period
 100.00

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

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

710.00

**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 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Don Santa

Mailing Address 199 Kent Ave

City Kentfield State CA Zip Code 94904-2522

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

Name of Employer Woodlands Market Occupation Business Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2011

Transaction ID : C6160336

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
John Schaefer

Mailing Address 1734 Roberts Way

City Arcata State CA Zip Code 95521-5016

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

Name of Employer Self Occupation Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : C5793978

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Susan Severin

Mailing Address 458 Laurel Ave

City San Anselmo State CA Zip Code 94960-2735

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

Name of Employer Retired Occupation Health Educator

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2011

Transaction ID : C5778041

Amount of Each Receipt this Period
50.00

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

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

400.00

**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 55			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
	12	13a	13b	14	15

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NAME OF COMMITTEE (In Full)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Nancy Starck

Mailing Address 725 Bayside Rd
Apt 2

City Arcata State CA Zip Code 95521-6400

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

Name of Employer County of Humboldt Occupation Legislative Analyst

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 29 / 2011

Transaction ID : C5774374

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Kate Stille

Mailing Address 39627 Lupine Ct

City Davis State CA Zip Code 95616-9756

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

Name of Employer Nugget Market Occupation Marketing Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : C6160880

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Carl T

Mailing Address 1770 Great Hwy

City San Francisco State CA Zip Code 94122-3923

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

Name of Employer San Francisco Police Department Occupation Police Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2011

Transaction ID : C5766479

Amount of Each Receipt this Period
25.00

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

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

525.00

**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 55
	<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)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Carl T

Mailing Address 1770 Great Hwy

City San Francisco State CA Zip Code 94122-3923

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

Name of Employer San Francisco Police Department Occupation Police Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2011

Transaction ID : C5783308

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Sally Tanner

Mailing Address PO Box 576

City Ferndale State CA Zip Code 95536

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2011

Transaction ID : C5774375

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Diana Taylor

Mailing Address 640 Davis St
Unit 13

City San Francisco State CA Zip Code 94111-1947

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

Name of Employer UCSF Occupation Professor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1125.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2011

Transaction ID : C5959888

Amount of Each Receipt this Period
500.00

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

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

1025.00

**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 55
	<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)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Barbara Thornton

Mailing Address 448 Scenic Ave

City San Anselmo State CA Zip Code 94960-2272

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

Name of Employer: Marin Telecommunications Agency Occupation: Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **850.00**

Date of Receipt: **12 / 30 / 2011**

Transaction ID : C6161533

Amount of Each Receipt this Period: **100.00**

B. Full Name (Last, First, Middle Initial)
Michael Tribolet

Mailing Address 41 Purrington Rd

City Petaluma State CA Zip Code 94952-4862

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

Name of Employer: County of Marin Occupation: Firefighter

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **220.00**

Date of Receipt: **11 / 04 / 2011**

Transaction ID : C5777173

Amount of Each Receipt this Period: **220.00**

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

Mailing Address 1458 London Circle

City Benicia State CA Zip Code 94510

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

Name of Employer: Kit Wall Productions Occupation: Public Relations

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **250.00**

Date of Receipt: **10 / 03 / 2011**

Transaction ID : C5748789

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

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

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

570.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 55
	<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)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Esther Wanning

Mailing Address 35 Saint Francis Lane

City San Rafael State CA Zip Code 94901

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

Name of Employer Self Occupation Psychotherapist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
460.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2011

Transaction ID : C5777195

Amount of Each Receipt this Period
110.00

B. Full Name (Last, First, Middle Initial)
Sheldon WhittenVile

Mailing Address 801 Rosemount Road

City Oakland State CA Zip Code 94610

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

Name of Employer Kaiser Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2011

Transaction ID : C5777888

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Sheldon WhittenVile

Mailing Address 801 Rosemount Road

City Oakland State CA Zip Code 94610

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

Name of Employer Kaiser Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2011

Transaction ID : C6160298

Amount of Each Receipt this Period
25.00

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

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

385.00

**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 55
	<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)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Richard Younkin

Mailing Address 4 Cielo Lane #3-D

City Novato State CA Zip Code 94949

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2011

Transaction ID : C5788844

Amount of Each Receipt this Period
 50.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

50.00

12239.15

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 55
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4.01

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011

Transaction ID : C6186123

Amount of Each Receipt this Period
4.01

* In-Kind: Internet Development

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D 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).....

4.01

4.01

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 55
	<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)
Susan Adams for Congress

A. Full Name (Last, First, Middle Initial)
American Nurses Association PAC

Mailing Address 8515 Georgia Ave

City Silver Spring State MD Zip Code 20910

FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2011

Transaction ID : C5777165

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
American Nurses Association PAC

Mailing Address 8515 Georgia Ave

City Silver Spring State MD Zip Code 20910

FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2011

Transaction ID : C5850577

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
Joan Lisetor for MCCD 2011

Mailing Address 3020 Bridgeway Ste 180

City Sausalito State CA Zip Code 94965

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
55.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2011

Transaction ID : C5777189

Amount of Each Receipt this Period
55.00

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

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

4055.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : C5777189

Federally Permissible Funds

Form/Schedule:

Transaction ID:

**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 55
	<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)
Susan Adams for Congress

A. Kendall Smith for Supervisor

Full Name (Last, First, Middle Initial)
Kendall Smith for Supervisor

Mailing Address PO Box 2015

City Fort Bragg State CA Zip Code 95437

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : C5850573

Amount of Each Receipt this Period

B. Marin County Deputy Sheriffs Assoc PAC

Full Name (Last, First, Middle Initial)
Marin County Deputy Sheriffs Assoc PAC

Mailing Address PO Box 4224

City San Rafael State CA Zip Code 94913-4224

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : C5777043

Amount of Each Receipt this Period

C. Phil Kranenberg for College Board

Full Name (Last, First, Middle Initial)
Phil Kranenberg for College Board

Mailing Address 100 Smith Ranch Rd Ste 108

City San Rafael State CA Zip Code 94903-1954

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : C5777187

Amount of Each Receipt this Period

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

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : C5850573

Federally Permissible Funds

Form/Schedule: SA11C

Transaction ID: C5777043

Federally Permissible Funds

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : C5777187

Federally Permissible Funds

Form/Schedule:

Transaction ID:

**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 30 OF 55			
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2011
Mailing Address 504 Clinton Center Dr Ste 4400		Amount of Each Disbursement this Period 1407.42
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	Transaction ID : D423327
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2011
Mailing Address 504 Clinton Center Dr Ste 4400		Amount of Each Disbursement this Period 56.30
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll processing fees	
Candidate Name	Category/Type	Transaction ID : D423329
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2011
Mailing Address 504 Clinton Center Dr Ste 4400		Amount of Each Disbursement this Period 1981.04
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	Transaction ID : D423330
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3444.76
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 31 OF 55			
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2011
Mailing Address 504 Clinton Center Dr Ste 4400		Amount of Each Disbursement this Period 56.30
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll processing fees	
Candidate Name	Category/Type	Transaction ID : D423332
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 504 Clinton Center Dr Ste 4400		Amount of Each Disbursement this Period 917.73
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	Transaction ID : D423336
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 504 Clinton Center Dr Ste 4400		Amount of Each Disbursement this Period 56.30
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll processing fees	
Candidate Name	Category/Type	Transaction ID : D423338
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1030.33
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 32 OF 55			
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011
Mailing Address 504 Clinton Center Dr Ste 4400		Amount of Each Disbursement this Period 1878.54 Transaction ID : D423366
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011
Mailing Address 504 Clinton Center Dr Ste 4400		Amount of Each Disbursement this Period 56.30 Transaction ID : D423368
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll processing fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 504 Clinton Center Dr Ste 4400		Amount of Each Disbursement this Period 1878.54 Transaction ID : D423371
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3813.38
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 33 OF 55			
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2011
Mailing Address 504 Clinton Center Dr Ste 4400		Amount of Each Disbursement this Period 56.30
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll processing fees	
Candidate Name	Category/Type	Transaction ID : D423375
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011
Mailing Address 504 Clinton Center Dr Ste 4400		Amount of Each Disbursement this Period 56.30
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll processing fees	
Candidate Name	Category/Type	Transaction ID : D423376
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2011
Mailing Address 504 Clinton Center Dr Ste 4400		Amount of Each Disbursement this Period 1960.54
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	Transaction ID : D423904
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2073.14
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 34 OF 55			
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Alliance Graphics			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2011		
Mailing Address 1101 8th Street			Amount of Each Disbursement this Period 259.19		
City Berkeley	State CA	Zip Code 94710	Transaction ID : D423341		
Purpose of Disbursement Printing		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Alliance Graphics			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2011		
Mailing Address 1101 8th Street			Amount of Each Disbursement this Period 21.75		
City Berkeley	State CA	Zip Code 94710	Transaction ID : D423343		
Purpose of Disbursement Office supplies		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Alliance Graphics			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2011		
Mailing Address 1101 8th Street			Amount of Each Disbursement this Period 328.06		
City Berkeley	State CA	Zip Code 94710	Transaction ID : D423348		
Purpose of Disbursement Printing		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	609.00
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 35 OF 55			
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Paul Andersen		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2011
Mailing Address 338 Bassett St		Amount of Each Disbursement this Period 2000.00 Transaction ID : D423346
City Petaluma	State CA	
Zip Code 94952-2512	Purpose of Disbursement Field Operations Consultant	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paul Andersen		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 338 Bassett St		Amount of Each Disbursement this Period 2000.00 Transaction ID : D415714
City Petaluma	State CA	
Zip Code 94952-2512	Purpose of Disbursement Field Operations Consultant	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Paul Andersen		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address 338 Bassett St		Amount of Each Disbursement this Period 2000.00 Transaction ID : D423353
City Petaluma	State CA	
Zip Code 94952-2512	Purpose of Disbursement Field Operations Consultant	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6000.00
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 36 OF 55			
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Baughman Company		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 1782 Union St		Amount of Each Disbursement this Period 1150.00 Transaction ID : D415770
City San Francisco State CA Zip Code 94123-4449	Purpose of Disbursement Printing Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Dr. Don's Buttons		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011
Mailing Address 3906 W Morrow Dr		Amount of Each Disbursement this Period 201.84 Transaction ID : D423373
City Glendale State AZ Zip Code 85308-7531	Purpose of Disbursement Bumper Stickers Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Dr. Don's Buttons		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011
Mailing Address 3906 W Morrow Dr		Amount of Each Disbursement this Period 80.64 Transaction ID : D424073
City Glendale State AZ Zip Code 85308-7531	Purpose of Disbursement Campaign buttons Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1432.48
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 37 OF 55			
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. California Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2011
Mailing Address 1401 21st Street, Suite 200		Amount of Each Disbursement this Period 350.00 Transaction ID : D427802
City Sacramento State CA Zip Code 95811	Purpose of Disbursement Registration Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. City of Trinidad		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2011
Mailing Address 409 Trinity Street		Amount of Each Disbursement this Period 40.00 Transaction ID : D423344
City Trinidad State CA Zip Code 95570	Purpose of Disbursement Event	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Strahm Communications		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2011
Mailing Address 3000 Kerner Blvd		Amount of Each Disbursement this Period 536.42 Transaction ID : D423357
City San Rafael State CA Zip Code 94901-5413	Purpose of Disbursement Printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	926.42
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 38 OF 55	
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address 430 South Capitol Street SE			Amount of Each Disbursement this Period 4.01
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Internet Development		Category/ Type	Transaction ID : D423944
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		* In-Kind Received
State: District:			

Full Name (Last, First, Middle Initial) B. Joe Farrell			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011
Mailing Address 492 Grove St			Amount of Each Disbursement this Period 1795.02
City San Francisco	State CA	Zip Code 94102-4303	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : D423372
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Joe Farrell			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address 492 Grove St			Amount of Each Disbursement this Period 215.24
City San Francisco	State CA	Zip Code 94102-4303	
Purpose of Disbursement Reimbursement - office supplies		Category/ Type	Transaction ID : D423358
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	2014.27
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 39 OF 55		
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Joe Farrell		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2011
Mailing Address 492 Grove St		Amount of Each Disbursement this Period 277.71 Transaction ID : D423359
City San Francisco	State CA	
Zip Code 94102-4303	Purpose of Disbursement Reimbursement - office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Joe Farrell		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 492 Grove St		Amount of Each Disbursement this Period 268.81 Transaction ID : D423355
City San Francisco	State CA	
Zip Code 94102-4303	Purpose of Disbursement Reimbursement - office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Joe Farrell		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2011
Mailing Address 492 Grove St		Amount of Each Disbursement this Period 103.06 Transaction ID : D423356
City San Francisco	State CA	
Zip Code 94102-4303	Purpose of Disbursement Reimbursement - office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	649.58
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 40 OF 55			
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Joe Farrell		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011
Mailing Address 492 Grove St		Amount of Each Disbursement this Period 1795.02 Transaction ID : D423367
City San Francisco	State CA	
Zip Code 94102-4303	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Joe Farrell		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2011
Mailing Address 492 Grove St		Amount of Each Disbursement this Period 1795.02 Transaction ID : D423362
City San Francisco	State CA	
Zip Code 94102-4303	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Joe Farrell		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 492 Grove St		Amount of Each Disbursement this Period 49.65 Transaction ID : D423345
City San Francisco	State CA	
Zip Code 94102-4303	Purpose of Disbursement Reimbursement - office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3639.69
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 41 OF 55	
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Joe Farrell		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2011
Mailing Address 492 Grove St		Amount of Each Disbursement this Period 130.00 Transaction ID : D423342
City San Francisco	State CA	
Zip Code 94102-4303	Purpose of Disbursement Reimbursement - office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Joe Farrell		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2011
Mailing Address 492 Grove St		Amount of Each Disbursement this Period 159.68 Transaction ID : D423339
City San Francisco	State CA	
Zip Code 94102-4303	Purpose of Disbursement Reimbursement - office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Joe Farrell		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2011
Mailing Address 492 Grove St		Amount of Each Disbursement this Period 118.51 Transaction ID : D423337
City San Francisco	State CA	
Zip Code 94102-4303	Purpose of Disbursement Reimbursement - office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	408.19
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 42 OF 55	
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Joe Farrell		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address 492 Grove St		Amount of Each Disbursement this Period 58.09
City San Francisco	State CA	
Zip Code 94102-4303	Purpose of Disbursement Reimbursement - office supplies	Transaction ID : D423350
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Joe Farrell		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 492 Grove St		Amount of Each Disbursement this Period 1795.02
City San Francisco	State CA	
Zip Code 94102-4303	Purpose of Disbursement Salary	Transaction ID : D423335
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Joe Farrell		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2011
Mailing Address 492 Grove St		Amount of Each Disbursement this Period 1795.02
City San Francisco	State CA	
Zip Code 94102-4303	Purpose of Disbursement Salary	Transaction ID : D415797
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3648.13
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 43 OF 55		
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Joe Farrell		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2011
Mailing Address 492 Grove St		Amount of Each Disbursement this Period 1795.02 Transaction ID : D423324
City San Francisco	State CA Zip Code 94102-4303	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. First Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 2240 New Market Pkwy SE		Amount of Each Disbursement this Period 571.77 Transaction ID : D423328
City Marietta	State GA Zip Code 30067-8771	
Purpose of Disbursement Credit card processing fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. First Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 2240 New Market Pkwy SE		Amount of Each Disbursement this Period 263.97 Transaction ID : D423370
City Marietta	State GA Zip Code 30067-8771	
Purpose of Disbursement Credit card processing fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2630.76
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 44 OF 55			
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. First Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2011
Mailing Address 2240 New Market Pkwy SE		Amount of Each Disbursement this Period 565.25
City Marietta	State GA	Zip Code 30067-8771
Purpose of Disbursement Credit card processing fees	Category/ Type	
Candidate Name	Transaction ID : D423360	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Healy Senior Center of Southern Humboldt		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2011
Mailing Address 456 Briceland Rd		Amount of Each Disbursement this Period 50.00
City Redway	State CA	Zip Code 95560
Purpose of Disbursement Event	Category/ Type	
Candidate Name	Transaction ID : D423349	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Laura Kantorowski		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 39 Pleasant Ln		Amount of Each Disbursement this Period 91.15
City San Rafael	State CA	Zip Code 94901-5048
Purpose of Disbursement event supplies	Category/ Type	
Candidate Name	Transaction ID : D424634	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	* In-Kind Received	

SUBTOTAL of Disbursements This Page (optional).....	706.40
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 45 OF 55			
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Catherine Landers		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011
Mailing Address 5289 Clearbrook Dr		Amount of Each Disbursement this Period 1751.94 Transaction ID : D423374
City Concord	State CA	
Purpose of Disbursement Salary	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Catherine Landers		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011
Mailing Address 5289 Clearbrook Dr		Amount of Each Disbursement this Period 1751.94 Transaction ID : D423369
City Concord	State CA	
Purpose of Disbursement Salary	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Catherine Landers		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2011
Mailing Address 5289 Clearbrook Dr		Amount of Each Disbursement this Period 1751.94 Transaction ID : D423363
City Concord	State CA	
Purpose of Disbursement Salary	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5255.82
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 46 OF 55			
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Catherine Landers		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2011
Mailing Address 5289 Clearbrook Dr		Amount of Each Disbursement this Period 978.19 Transaction ID : D423325
City Concord	State CA	
Zip Code 94521-1675	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Catherine Landers		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2011
Mailing Address 5289 Clearbrook Dr		Amount of Each Disbursement this Period 1751.94 Transaction ID : D423331
City Concord	State CA	
Zip Code 94521-1675	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Marinwood Community Services District		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2011
Mailing Address 775 Miller Creek Road		Amount of Each Disbursement this Period 400.00 Transaction ID : D423334
City San Rafael	State CA	
Zip Code 94903	Purpose of Disbursement Event	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3130.13
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 55	
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Mendocino County Democratic Central Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2011
Mailing Address PO Box 28		Amount of Each Disbursement this Period 250.00 Transaction ID : D423323
City Ukiah	State CA Zip Code 95482	
Purpose of Disbursement Event	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mendocino County Democratic Central Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2011
Mailing Address PO Box 28		Amount of Each Disbursement this Period 120.00 Transaction ID : D423340
City Ukiah	State CA Zip Code 95482	
Purpose of Disbursement Event	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NGP VAN		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2011
Mailing Address 1101 15th St NW		Amount of Each Disbursement this Period 2100.00 Transaction ID : D415728
City Washington	State DC Zip Code 20005-5002	
Purpose of Disbursement Database Services	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2470.00
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 48 OF 55			
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. NWPC California		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2011
Mailing Address P.O. Box 50476		Amount of Each Disbursement this Period 65.00
City Washington	State DC	
Zip Code 20091	Purpose of Disbursement Dues	Transaction ID : D423365
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NWPC of California PAC Fund		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2011
Mailing Address 220 Newport Center Dr Ste 11		Amount of Each Disbursement this Period 100.00
City Newport Beach	State CA	
Zip Code 92660-7557	Purpose of Disbursement Event ticket	Transaction ID : D424064
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Richard Salzman		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 1751 Charles Ave		Amount of Each Disbursement this Period 1000.00
City Arcata	State CA	
Zip Code 95521-6815	Purpose of Disbursement Field Operations Consultant	Transaction ID : D423354
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1165.00
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 55			
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Richard Salzman			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 1751 Charles Ave			Amount of Each Disbursement this Period 1000.00 Transaction ID : D415720
City Arcata	State CA	Zip Code 95521-6815	
Purpose of Disbursement Field Operations Consultant		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Richard Salzman			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2011
Mailing Address 1751 Charles Ave			Amount of Each Disbursement this Period 1000.00 Transaction ID : D423347
City Arcata	State CA	Zip Code 95521-6815	
Purpose of Disbursement Field Operations Consultant		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Kelly Smith			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 204 El Prado Avenue			Amount of Each Disbursement this Period 155.00 Transaction ID : D419331
City San Rafael	State CA	Zip Code 94903	
Purpose of Disbursement Event Supplies		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		* In-Kind Received
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	2155.00
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 50 OF 55			
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Susan Adams		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011
Mailing Address 225 Roundtree Way		Amount of Each Disbursement this Period 160.00 Transaction ID : D423352
City San Rafael State CA Zip Code 94903	Purpose of Disbursement Outreach Event	
Candidate Name Susan Adams	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 02		

Full Name (Last, First, Middle Initial) B. Ed Vorous		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 1423 Lincoln Ave		Amount of Each Disbursement this Period 298.37 Transaction ID : D422101
City San Rafael State CA Zip Code 94901-2028	Purpose of Disbursement Event Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. SF Fire Credit Union		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address 3201 California St		Amount of Each Disbursement this Period 327.25 Transaction ID : D423351
City San Francisco State CA Zip Code 94118-1903	Purpose of Disbursement Credit Card Payment	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	785.62
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 55	
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Amazon.com		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 440 Terry Ave. N		Amount of Each Disbursement this Period 15.86
City Seattle	State WA	
Zip Code 98109	Purpose of Disbursement Event Supplies	Transaction ID : D424074
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. BuyCostumes.com		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2011
Mailing Address 5915 S. Moorland Rd.		Amount of Each Disbursement this Period 89.43
City New Berlin	State WI	
Zip Code 53151	Purpose of Disbursement Event Supplies	Transaction ID : D424070
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Dollar Tree, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2011
Mailing Address 825 Francisco Blvd W		Amount of Each Disbursement this Period 26.04
City San Rafael	State CA	
Zip Code 94901	Purpose of Disbursement Event Supplies	Transaction ID : D424072
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 52 OF 55	
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. MakesParties.com		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2011
Mailing Address 300 Jericho Quadrangle Ste 240		Amount of Each Disbursement this Period 163.50
City Jericho	State NY Zip Code 11753-2719	
Purpose of Disbursement Event Supplies	Candidate Name	Transaction ID : D424071
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Party City		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 25 Green Pond Road		Amount of Each Disbursement this Period 32.42
City Rockaway	State NJ Zip Code 07866	
Purpose of Disbursement Event Supplies	Candidate Name	Transaction ID : D424075
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C.		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	Transaction ID
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	47988.10

**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 55	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Friends of Susan Adams		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011
Mailing Address P.O. Box 4091		Amount of Each Disbursement this Period 1000.00 Transaction ID : D423905
City San Rafael	State CA	
Zip Code 94913	Purpose of Disbursement Refund	Category/ Type
Candidate Name Susan Adams	Disbursement For: 2012 <input checked="" 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: CA District:	

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

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB20C

Transaction ID : D423905

Refund of contribution made during 3rd quarter of 2011

Form/Schedule:

Transaction ID:

**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 55	
	<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)
Susan Adams for Congress

Full Name (Last, First, Middle Initial) A. Mike Thompson for Congress		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2011
Mailing Address PO Box 10541		Amount of Each Disbursement this Period 150.00
City Napa State CA Zip Code 94581	Purpose of Disbursement Event ticket	
Candidate Name	Category/Type	Transaction ID : D423364
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

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

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

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