

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines.   
**JEFF PAC**

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

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

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day **POST-Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  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 **DAVID BAUER**

Signature of Treasurer **DAVID BAUER** [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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

JEFF PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="66304.20"/>	<input type="text" value="66304.20"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="79299.62"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="67222.62"/>	<input type="text" value="90022.62"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="146522.24"/>	<input type="text" value="156326.82"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8702.41"/>	<input type="text" value="18506.99"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="137819.83"/>	<input type="text" value="137819.83"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**JEFF PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 03 / 01 / 2014 To: M M / D D / Y Y Y Y 03 / 31 / 2014

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5000.00	22800.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5000.00	22800.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	7500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	7500.00	30300.00
12. Transfers From Affiliated/Other Party Committees.....	59722.62	59722.62
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	67222.62	90022.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	67222.62	90022.62

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	1709.95
(b) Other Federal Operating Expenditures .....	2202.41	4297.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2202.41	6006.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6500.00	12500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8702.41	18506.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8702.41	16797.04

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7500.00	30300.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7500.00	30300.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2202.41	4297.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2202.41	4297.04

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

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

FOR LINE NUMBER: PAGE 6 OF 17  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**JEFF PAC**

**A. KENNETH LAGRANDE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 1107  
 City WILLIAMS State CA Zip Code 95987  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SUN VALLEY RICE Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : INCA295**  
 Amount of Each Receipt this Period  
 5000.00

**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) ▼  
 Aggregate Year-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) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

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

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

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

FOR LINE NUMBER: PAGE 7 OF 17  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**JEFF PAC**

**A. FARM CREDIT PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 F ST. NW #900  
City WASHINGTON State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C** C00193631  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 25 / 2014  
**Transaction ID : INCA292**  
Amount of Each Receipt this Period  
2500.00

**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) ▼  
Aggregate Year-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) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**JEFF PAC**

Full Name (Last, First, Middle Initial)  
**A. DENHAM VICTORY FUND**

Mailing Address 2150 RIVER PLAZA DR., #150

City State Zip Code  
SACRAMENTO CA 95833

FEC ID number of contributing federal political committee. **C** C00496018

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
59722.62

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

**Transaction ID : INCA293**

Amount of Each Receipt this Period  
59722.62

TRANSFER FROM JFC

Full Name (Last, First, Middle Initial)  
**B. BLUE DIAMOND GROWERS PAC**

Mailing Address 1802 C ST.

City State Zip Code  
SACRAMENTO CA 95814

FEC ID number of contributing federal political committee. **C** C00080135

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
01 / 12 / 2014

**Transaction ID : IDTA173**

Amount of Each Receipt this Period  
5000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**C. . SAN MANUEL BAND OF MISSION IND**

Mailing Address 26569 COMMUNITY CENTER DR.

City State Zip Code  
HIGHLAND CA 92346

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

Name of Employer Occupation  
SOVEREIGN NATION INDIAN TRIBE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2014

**Transaction ID : IDTA156**

Amount of Each Receipt this Period  
5000.00

[MEMO ITEM]

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	59722.62
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**JEFF PAC**

Full Name (Last, First, Middle Initial) <b>A. FRED FAGUNDES</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2014 <b>Transaction ID : IDTA157</b>
Mailing Address 11158 AVE. 24		Amount of Each Receipt this Period 1666.68
City CHOWCHILLA	State CA	Zip Code 93610
FEC ID number of contributing federal political committee. C		[MEMO ITEM]
Name of Employer FAGUNDES DAIRY	Occupation FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1666.68	

Full Name (Last, First, Middle Initial) <b>B. LLOYD FAGUNDES</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2014 <b>Transaction ID : IDTA158</b>
Mailing Address 11158 AVE. 24		Amount of Each Receipt this Period 1666.66
City CHOWCHILLA	State CA	Zip Code 93610
FEC ID number of contributing federal political committee. C		[MEMO ITEM]
Name of Employer FAGUNDES DAIRY	Occupation FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1666.66	

Full Name (Last, First, Middle Initial) <b>C. RALPH FAGUNDES</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2014 <b>Transaction ID : IDTA159</b>
Mailing Address 11158 AVE. 24		Amount of Each Receipt this Period 1666.66
City CHOWCHILLA	State CA	Zip Code 93610
FEC ID number of contributing federal political committee. C		[MEMO ITEM]
Name of Employer FAGUNDES DAIRY	Occupation FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1666.66	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**JEFF PAC**

**A. CHRISTINE LONG**  
Full Name (Last, First, Middle Initial)  
Mailing Address 13890 LOONEY RD.  
City Ballico State CA Zip Code 95303  
FEC ID number of contributing federal political committee. **C**  
Name of Employer HILLTOP RANCH INC. Occupation VP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 20 / 2014  
Transaction ID : IDTA164  
Amount of Each Receipt this Period 5000.00  
[MEMO ITEM]

**B. DAVID LONG**  
Full Name (Last, First, Middle Initial)  
Mailing Address 13890 LOONEY RD.  
City Ballico State CA Zip Code 95303  
FEC ID number of contributing federal political committee. **C**  
Name of Employer HILLTOP RANCH INC. Occupation PRESIDENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 20 / 2014  
Transaction ID : IDTA165  
Amount of Each Receipt this Period 5000.00  
[MEMO ITEM]

**C. JEFF MARCHINI**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12006 E. LE GRAND RD.  
City LE GRAND State CA Zip Code 95333  
FEC ID number of contributing federal political committee. **C**  
Name of Employer BONA VISTA ORCHARDS Occupation FARMER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 03 / 20 / 2014  
Transaction ID : IDTA160  
Amount of Each Receipt this Period 1300.00  
[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

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NAME OF COMMITTEE (In Full)  
**JEFF PAC**

**A. JOE MARCHINI**  
Full Name (Last, First, Middle Initial)

Mailing Address 12006 E. LE GRAND RD.

City LE GRAND	State CA	Zip Code 95333
------------------	-------------	-------------------

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

Name of Employer BONA VISTA ORCHARDS	Occupation FARMER
---	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2014

**Transaction ID : IDTA161**

Amount of Each Receipt this Period  

1300.00
---------

**[MEMO ITEM]**

**B. MARIA SWANSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 5213 W. MAIN ST.

City TURLOCK	State CA	Zip Code 95380
-----------------	-------------	-------------------

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

Name of Employer PROSPECTOR, LLC	Occupation FARMER
-------------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2014

**Transaction ID : IDTA162**

Amount of Each Receipt this Period  

5000.00
---------

**[MEMO ITEM]**

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

Mailing Address 2205 SWAN PARK DR.

City TURLOCK	State CA	Zip Code 95382
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FEC ID number of contributing federal political committee. **C**

Name of Employer SWANSON FARMS	Occupation FARMER
-----------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2014

**Transaction ID : IDTA163**

Amount of Each Receipt this Period  

5000.00
---------

**[MEMO ITEM]**

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

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

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

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NAME OF COMMITTEE (In Full)  
**JEFF PAC**

**A. GARY ALLDRIN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 515.LYELL DR. #103

City MODESTO	State CA	Zip Code 95356
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer ALLDRIN BROS.	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Date of Receipt  
03 / 25 / 2014  
**Transaction ID : IDTA174**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**

**B. DARIUS ASSEMI**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1396 W. HERNDON #101

City FRESNO	State CA	Zip Code 93711
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer GRANVILLE HOMES	Occupation BUILDER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt  
03 / 26 / 2014  
**Transaction ID : IDTA166**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**

**C. JOHN BRICHETTO**  
Full Name (Last, First, Middle Initial)  
Mailing Address P. O. BOX 11600

City OAKDALE	State CA	Zip Code 95361
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer BRICHETTO BROS.	Occupation FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Date of Receipt  
03 / 28 / 2014  
**Transaction ID : IDTA175**

Amount of Each Receipt this Period  
700.00

**[MEMO ITEM]**

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

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

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

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NAME OF COMMITTEE (In Full)  
**JEFF PAC**

Full Name (Last, First, Middle Initial) <b>A. BENJAMIN CRANE</b>		Date of Receipt
Mailing Address 5500 E. SOUTH BEAR CREEK DR.		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
MERCED	CA	95340
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : IDTA170</b>
Name of Employer BERT CRANE ORCHARDS		Amount of Each Receipt this Period
Occupation PARTNER		<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<b>[MEMO ITEM]</b>
<input type="text" value="5000.00"/>		

Full Name (Last, First, Middle Initial) <b>B. BERT CRANE</b>		Date of Receipt
Mailing Address 5500 E. SOUTH BEAR CREEK DR.		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
MERCED	CA	95340
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : IDTA169</b>
Name of Employer BERT CRANE ORCHARDS, L.P.		Amount of Each Receipt this Period
Occupation FARMER		<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<b>[MEMO ITEM]</b>
<input type="text" value="5000.00"/>		

Full Name (Last, First, Middle Initial) <b>C. BERT CRANE, JR.</b>		Date of Receipt
Mailing Address 5500 E. SOUTH BEAR CREEK DR.		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Merced	CA	95340
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : IDTA168</b>
Name of Employer BERT CRANE ORCHARDS		Amount of Each Receipt this Period
Occupation FARMER		<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<b>[MEMO ITEM]</b>
<input type="text" value="5000.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

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NAME OF COMMITTEE (In Full)  
**JEFF PAC**

**A. JIM VIEIRA**  
Full Name (Last, First, Middle Initial)

Mailing Address 2190 EL CAPITAN

City Turlock State CA Zip Code 95380

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

Name of Employer PTF METALS Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

**Transaction ID : IDTA171**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**

**B. JULIE VIEIRA**  
Full Name (Last, First, Middle Initial)

Mailing Address 2190 EL CAPITAN

City Turlock State CA Zip Code 95380

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

Name of Employer NOT EMPLOYED Occupation NOT EMPLOYED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

**Transaction ID : IDTA172**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**

**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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	59722.62

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**JEFF PAC**

Full Name (Last, First, Middle Initial)

**A. CHASE CARDMEMBER SERVICES**

Mailing Address P. O. BOX 94014

City PALATINE State IL Zip Code 60094

Purpose of Disbursement  
CREDIT CARD PAYMENT

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2014

Transaction ID : EXPB291

Amount of Each Disbursement this Period

2198.91
---------

Full Name (Last, First, Middle Initial)

**B. RITZ-CARLTON**

Mailing Address 1111 RITZ-CARLTON DR.

City SARASOTA State FL Zip Code 34236

Purpose of Disbursement  
FUNDRAISING EVENT

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2014

Transaction ID : EDTB120EXPB291

Amount of Each Disbursement this Period

1301.41
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. MARRIOTT**

Mailing Address 1800 OLD BAYSHORE HWY

City BURLINGAME State CA Zip Code 94010

Purpose of Disbursement  
LODGING

002

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2014

Transaction ID : EDTB121EXPB291

Amount of Each Disbursement this Period

225.56
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[MEMO ITEM]

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

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

2198.91
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**JEFF PAC**

Full Name (Last, First, Middle Initial)

**A. RITZ-CARLTON**

Mailing Address 1111 RITZ-CARLTON DR.

City SARASOTA State FL Zip Code 34236

Purpose of Disbursement  
LODGING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : EDTB122EXPB291

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**JEFF PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL GRIMM FOR CONGRESS**

Mailing Address P. O. BOX 61806

City State Zip Code  
STATEN ISLAND NY 10306

Purpose of Disbursement

011

Candidate Name

**MICHAEL GRIMM**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	03	/	2014

**Transaction ID : EXPB288**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. CARL DEMAIO FOR CONGRESS**

Mailing Address P. O. BOX 27227

City State Zip Code  
SAN DIEGO CA 92198

Purpose of Disbursement

011

Candidate Name

**CARL DEMAIO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 52

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	18	/	2014

**Transaction ID : EXPB290**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. JEFF GORELL FOR CONGRESS**

Mailing Address 2219 E. THOUSAND OAKS BLVD. #209

City State Zip Code  
THOUSAND OAKS CA 91362

Purpose of Disbursement

011

Candidate Name

**JEFF GORELL**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	18	/	2014

**Transaction ID : EXPB289**

Amount of Each Disbursement this Period

2000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

6500.00
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**TOTAL** This Period (last page this line number only)..... ▶

6500.00
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